



Summer Camp Application 2019

Check The Session(s) Your Child Would Like To Attend:

Session 1-(June 4-7) Session 2-(July 9-12) Session 3-(July 23-26) Session 4-(August 6-9)

Child's First Name: _____ Last Name: _____ Age: _____ Gender: M F

Child's First Name: _____ Last Name: _____ Age: _____ Gender: M F

Child's First Name: _____ Last Name: _____ Age: _____ Gender: M F

Child's First Name: _____ Last Name: _____ Age: _____ Gender: M F

Address: _____ City/State/Zip: _____

Mother's First Name: _____ Last Name: _____ Cell Phone #: _____

Father's First Name: _____ Last Name: _____ Cell Phone #: _____

Email: _____

OR Guardian's First Name: _____ Last Name: _____ Cell Phone #: _____

Emergency Contact

Name/Relationship: _____ Phone: _____

Child's Allergies, medications, limitations or medical conditions that we should know about:

Tuition: (Please Check One)

*****10% Discount to any family registering more than 1 child – discount does not apply to Stone Gate Residents*****

Before May 19th: Stone Gate residence \$75 Member \$200 Non Member \$250

After May 19th: Stone Gate residence \$75 Member \$225 Non Member \$275

Payment Method: (Please Check One)

Charge my member # _____ the amount of \$ _____

Pay By Check: (If yes, please attach check) Check Number: _____ Amount: \$ _____

Charge my Credit card:

Circle One: Visa Master Card Amex the amount of \$ _____

Card #: _____ Exp: _____ / _____ cvv#: _____

Please Return **BOTH completed forms** to: Keena Salisbury at keena@houstonnationalgolf.com or drop off @ Front Desk or Membership Desk at Sterling Country Club, 16500 Houston National Blvd, Houston, TX, 77095



**Summer Camp Medical and Liability
Release**

Names of parents/Legal Guardians	of	Harris	County, Texas, as the Parent(s) or legal
Guardian(s) of	Names of Child(ren)		

,our minor child(ren), do hereby release for and on behalf of ourselves and our minor child(ren), Sterling Country Club, 16500 Houston National Blvd. Houston TX 77095, all owners, contracted agents and employees of such club, for any and all damages and/or personal injury which may occur in and form any connections with such club's sponsoring special events and activities associated with "Sterling Country Club Summer Camp"

This is a full release of any and all claims given in considerations for Sterling Country Club , its owners, agents and employees, sponsoring the above activities and events, from the time of my child's/children's arrival at the events until his/her/their departure.

The undersigned, have read this release, and understand all its terms and hereby execute it voluntarily with full knowledge and understanding of its significance and also acknowledge that **camp admission and participation will not be granted to my child(ren) without fully completed and signed camp application and medical and liability release.**

Medical Release:

We hereby also consent to emergency medical/or hospital service that may be rendered by accredited hospitals or by appointed physicians, in the event such a need arises in the opinion of the duly licensed physician.

If possible, please contact family physician/pediatrician:

Name: _____ Office Address: _____

Emergency Phone: _____ Hospital of Choice: _____

By providing the phone number and address listed on this form, I/we hereby give the Club my/our express written permission to contact me/us at each number or address to keep me/us informed about Club events, services and offerings. I/We acknowledge that the Club values my/our right to privacy. I/we understand that I/We can revoke this consent at any time by contacting the Club in writing.

X _____ Date: _____
Parent/Guardian

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