

Student's Medical Information:

Allergies (drug, food, etc.).....Yes ___ No ___
Serious Injury (fractures or broken bones.....
.....Yes ___ No ___
Birth Deformities (short Leg, Arm, etc.)
.....Yes ___ No ___
Seizures or convulsions.....Yes ___ No ___
Mental Disorders.....Yes ___ No ___
Contacts or Glasses.....Yes ___ No ___
Known past illness of more than one week's
duration.....Yes ___ No ___
If you answered yes to any of the above questions,
Please explain _____

Release of Liability and Assumption of Risk
In consideration of the opportunity afforded to me to
participate in Karate instruction classes, in connection
with my enrollment as a student in Genova Family
Karate and Genova Family Karate of Lexington, and
in recognition of a possible danger to which I may
voluntarily waive right of cause of action of any kind
whatsoever arising as the result of such activity from
which any liability may or could accrue to Genova
Family Karate of Lexington, it's officers, agents, or
employees and instructors. I hereby accept these risks.
(_____) Initials)
This release shall be binding upon the distributees,
heirs, next of kin, executor, and administration of each
the undersigned. In signing the foregoing release, the
undersigned hereby acknowledges and represents that
he/she has read the foregoing release, understands it,
and signs it voluntarily. In witness where of, I have
here unto set my hands and seal this _____ day
of _____, 20_____.
Signature or (parent or Guardian if under the age of 18)

Camp Schedule

*Summer Camps will typically follow this
schedule. However, it is subject to change
due to weather and other activities.*

(NO electronics)

7:30am: Doors open
(Early drop off available)

7:30am – 9:00am
Camper check-in, free play

9:00am – 10:00am
Morning Karate Activities

10:00am – 10:30am Snack

10:30am – 12:00am
Morning Karate Activities

12:00pm –1:00pm Lunch

1:00pm – 3:30pm
Crafts, Games / Free play
or Group Activity

3:30pm – 4:00pm Snack

4:00pm – 5:00pm
Free play or Physical
fitness until pickup or classes.

Genova Family
Karate
of Lexington
2017 Summer Camps



**169-B Hwy 378 West
Lexington, SC 29072**

Email:
info@GenovaKarateLexington.com

Thank you for choosing
GENOVA FAMILY KARATE
of Lexington as your
preferred summer camp for 2017.
Our structured camps will help
your child focus on self-esteem,
discipline, respect, honesty,
courage, optimism, sharing, and
sportsmanship. We will help you
keep your child entertained and
active during the summer. No
karate experience needed.

**Non-members
welcome!**

Summer Camp Pricing:

Full Day Camp \$120

7:30am-5:00pm

Camp cost will be \$150 if
registered after July 12.

**\$25 non-refundable deposit
required for each week of camp**

(applied to cost of camp)

**\$90 per child Half day camp Morning,
\$75 per child Half day camp Afternoon**

What to Bring:

Campers are required to bring their
own lunch each day for the week.
Please pack a healthy, filling lunch.
You may pack extra snacks if you
would like.

Campers should dress in comfortable
clothing each day and bring closed-
toed athletic shoes.

Please have your camper bring a
water bottle, as we will spend part of
our days outside.

Campers may bring books to read,
coloring or other quiet activities for
them to do during free play time.

NO ELECTRONICS PLEASE!

***There will be no Summer Camp,
summer program or karate classes
July 3 – 7.**

**Enjoy Independence Day
with your family and friends!***

If you would like us to help your
child build a weapon from wood to
teach them sanding, staining and
finishing techniques please choose
the weapon and add \$40 per weapon.
One weapon per camp.

Summer Camp Registration:

Student Name: _____

Age: _____ D.O.B: _____

Parents' Name(s): _____

Address: _____

City / State / Zip: _____

Contact Phone: (1) _____

(2) _____

Email: _____

In the event of an emergency we will always try
to contact parent or guardian first, if we are
unable to reach you please give us the name
and phone number of the person you would
want us to contact.

Name: _____

Phone # _____

May we use pictures of your child for social me-
dia promotion? ____ Yes ____ No

Parent Signature: _____

**Please indicate which week(s) of
camp you would like your child
to attend: _____ June 19-23**

_____ July 24-28 _____ Aug 14-18

SWORD _____ ESCRIMA _____

BO STAFF _____

Cut along here.