

Virtual Reality Camp

ClubFitness Oak Branch now offers the fun experience of camp with the immersive environment of Virtual Reality. Kids will love diving into new worlds where they can ride high velocity rollercoasters, swim with ocean life, box against a heavyweight champion, train their pet dragon, & much more! With our HTC VIVE system, your child can have the experience of a lifetime.



Daily Camp Schedule

Schedule subject to change without notice

- 8:30-9:00 Drop Off/ClubZone**
- 9:00-10:00 Virtual Reality Intro/Outdoor Activity (informational & rules)**
- 10:00-11:00 Virtual Reality Group 1/Swim**
- 11:00-12:00 Virtual Reality Group 2/Swim**
- 12:00-1:00 Virtual Reality Free Play/Lunch**

Extended Stay is available from 1-5:30pm for an additional fee. For extended stay, your child has the option of participating in any other full day camps that are taking place the same week as the chosen camp week.

What do you bring?

- Comfortable clothes and shoes.
 - Swim Suit
 - Lunch
 - Water Bottle
- (Snacks will be provided)

21-A Oak Branch Drive
Greensboro, NC 27407

www.clubfitnessgso.com



Virtual Reality Summer Camps 2019

Ages 8-14
Monday-Friday
8:30-1pm



For More Information contact
Oak Branch Concierge Desk
info@clubfitnessgso.com
(336)851-1890 ext 1102



2019 Virtual Reality Summer Camp at ClubFitness-Oak Branch

Guardian		Cell #		Other #	
Email Address		Cell #			
Street Address		City		Zip Code	
1st Child		DOB		ALLERGY	
2nd Child		DOB		ALLERGY	
(Circle One)	Child or Guardian ClubFitness Member	Non-Member			

DAILY RATE: (8:30am-1:00pm) \$55 Members/ \$70 Non-Members

WEEKLY RATE: (8:30am-1:00pm) \$250 Members/ \$265 Non-Members *Weekly Rate applies to Mon-Fri of same calendar week

EARLY DROP OFF (7:30am) \$5/Day or \$19/Week

EXTENDED STAY: \$50/week

EARLY BIRD REGISTRATON: Register by March 31st, **receive 10% off weekly pricing** *EXCLUDES SWIM CAMP*

MULTI-WEEK DISCOUNT: Register for 3 or more camps, **receive \$10 off of each camp** *EXCLUDES SWIM CAMP*

PAYMENT IN FULL DUE AT TIME OF REGISTRATION. ENROLL AT info@clubfitnessgso.com or (336) 851-1890 ext 1102

2019 Camp Dates	1st Child X	2nd Child X	Extended Stay? *Specify camp*	Early Drop Off	Amt \$	Pymt Type	For Office Use Only				
							POS	Enroll	E-List	Allergy List	Initials
June 17-21, 2019											
July 15-19, 2019											
August 5-9, 2019											

Membership Liability Waiver/Permission for Medical Treatment Parent / Guardian Signature: _____

I understand that the use and/or the participation in any activities at ClubFitness may involve the risk of serious injury. I represent that my child is physically able to undertake all physical activities, exercises and sports provided by signing below. I hereby, forever RELEASE, waive and discharge Club Fitness, its affiliates, officers, directors, servants, agents, employees on behalf of myself, my heirs, executors, administrators and personal representatives from any and all claims, demands, injuries, actions, active or passive negligence or other causes or actions arising out of or connected with the use of ClubFitness services or facilities. I authorize ClubFitness employees to take the necessary steps regarding medical attention (i.e. first aid, calling ambulance service or transportation to be admitted to the hospital) and will allow authorized hospital facility/staff to treat my child for any illness or injury.

Refund & Makeup Policy

Parent/Guardian Signature _____

There are No Refunds or make-ups for missed days of camp. Cancellation of ClubFitness School Holiday Recreation Camps may only be permitted due to a medical issue. In case of illness, a doctor's note will be required in make up missed day(s) within the current school year based on space availability. Any Inquiries should be directed to Jerry Oviedo, Children's Programming Director, ClubFitness.

Photo Release Waiver:

Parent/Guardian Signature _____

I authorize and permit ClubFitness Greensboro to use reproduction pictures of myself and/or my child for advertising, print work, The Club's website or any lawful purpose whatsoever in which I/my child may be included in whole or in part. I hereby irrevocably release and forever discharge the aforementioned parties and all representatives from all and any liability by the taking/or publishing of any photograph or video of me/my child as authorized in this consent form. I warrant that I am of full age and have every right to contract in my own/my child's name and that I am fully familiar with the contents of this authorization & consent. I hereby waive any right to compensation for the stated uses and I acknowledge that I have read and understand the above & agree to the terms of this consent & release.