



N. Myrtle Beach Park & Sports Complex
 150 Citizens Circle
 Little River, SC
 Phone: 843-399-9253
 SHARKWAKEPARK.COM/843

2020 Shark Wake Park Summer Camp

General Information

- Summer Camp is a **one-week camp** providing wakeboarding instruction, and runs Monday through Friday, 10am - 4pm.
- Early Dropoff (9AM) & Late Pickup (5PM) is available for an additional fee.
- We will ensure an 8-1 ratio of campers to counselors with a maximum of 40 campers
- Camp is for ages 7 to 15, all skill levels welcome!
- Camp BBQ on every Friday (Hot dogs/hamburgers)
- In order to hit any ramps or features, Advanced Gear Package must be purchased
- Each camper receives a SWP T-Shirt (Circle size of shirt) S M L XL

Build Your Camp Package (Check all that apply)

Check	Item	Cost
	Summer Camp Early Registration (sign-up before May 15th) *includes all basic gear*	\$249
	Standard Summer Camp (includes all basic gear)	\$299
	Each Additional Week of Summer Camp	\$249
	Additional Sibling - Discounted Rate - Week of Summer Camp	\$249
	Advanced Gear Pkg (includes Advanced Board, vest, & helmet)	\$49
	Early Drop Off/Late Pick Up for the Week	\$100
	Account Money (Snacks, Drinks, Etc.) (please put amount)	\$_____

If Basic Gear Pkg is selected, an upgrade to Advanced Gear Wednesday through Friday is available for an additional \$30

Check	Week	Dates
	1	June 8 - 12
	2	June 15 - 19
	3	June 22 - 26
	4	June 29 - July 3
	5	July 6 - 10
	6	July 13 - 17
	7	July 20 - 24
	8	July 27 - 31
	9	August 3-7

Things You'll Need to Bring Every Day

- Lunch (except Friday)
- Towel
- Sunscreen
- Dry Change of Clothes

PLEASE EMAIL COMPLETED FORM TO INFO843@SHARKWAKEPARK.COM



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Participant's Name _____

Date of Birth _____

Address _____

City _____ State _____ Zip _____

Home Phone _____

Father's Name _____ Father's Phone _____

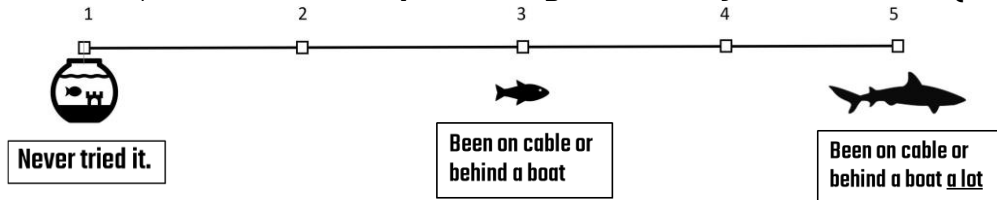
Mother's Name _____ Mother's Phone _____

Emergency Contact Name _____ Relation _____

Emergency Contact Phone _____

Email (Required) _____

On a scale of 1-5, how much watersports background does your child have? (check one)



Does the Camper have any friends that will be attending this camp? If so, please list them so we can keep them together. _____

Is there anything specific the camper would like to learn at our camp? _____

Medical Information:

Is the camper taking any medication? (if yes, please state special instructions) _____

Does the camper have any allergies? (if so, please list) _____

Is there any other important information we should know about your child's medical needs?

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Payment

In order to reserve a spot in the Shark Wake Park Summer Camp, payment must be received at the time of creating the reservation. You can pay in person in the Shark Wake Park office, book online at Sharkwakepark.com/843 or by emailing us at info843@sharkwakepark.com

CHECKS WILL NOT BE ACCEPTED

Waiver

Each child will need to have a waiver filled out by a parent or legal guardian. If the parent is not going to be present on the first day of camp, the waiver must be filled out and notarized prior to arriving. If the parent will be present on the first day of camp, the waiver can be filled out in our office.

Cancellation Policy

There is a strict NO CANCELLATION Policy. All rescheduling must be done within 48 hours. Camp Sessions run on consecutive days in a single week. If the camper misses any days during camp there will be no refunds for that day or any other days.

NO REFUNDS WILL BE GIVEN

I hereby authorize Shark Wake Park to act for me according to their best judgment in any emergency requiring medical attention and hereby waive and release the camp staff and Shark Wake Park from any and all liability for any injuries or illness incurred while at camp. I understand that participation in various sports involves motion and as such carries with it the risk of injury. The camp is not responsible for personal items that are lost, stolen or damaged. All medical expenses incurred will be the responsibility of the camper's family. In lieu of medical certificate signed by a medical doctor, I have no knowledge of any physical or mental impairment that would be affected by the named camper's participation in the camp program. I also understand that the camp retains the right to use photographs, videotapes, motion picture recordings, or any other record of this event for publicity, advertising, or any legitimate purpose.

Parent or Guardian Signature _____

Parent or Guardian Print _____

Date _____

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