



CLUB FIT KIDS SALEM VACATION CAMP MEMBER/NON-MEMBER RATES - 2017

Club Fit Kids Camp for 4-12 year olds! Register your children for full or half days. Activities include swim, splash park, rock climbing, kids intro to all things fitness, team building games, activities, mixed martial arts, healthy eating snacks. Children will be separated by age.
Additional 10% is offered below for siblings.

***NO EARLY DROP OFF || LATE PICK UP IS INCLUDED EXCEPT FRIDAYS || NO AFTERCARE FRIDAYS!**

2017 NH APRIL VACATION WEEK: APRIL 24-28TH

***early bird special 10% off if paid in full by March 31st**

CLUB FIT KIDS HALF 8:30-1pm or 12:30-5pm

2 DAY HALF CAMP			3 DAY HALF CAMP			4 DAY HALF CAMP			5 DAY HALF CAMP		
# Children	Member	Non	# Children	Member	Non	#Children	Member	Non	#Children	Member	Non
1	\$68	\$88	1	\$90	\$110	1	\$115	\$135	1	\$140	\$160
2	10%	\$122	\$142	2	10%	\$162	\$182	2	10%	\$207	\$227
3	10%	\$184	\$204	3	10%	\$230	\$250	3	10%	\$310	\$330
3	10%	\$378	\$398								

CLUB FIT KIDS FULL DAY 8:30-5:00PM

2 DAY FULL CAMP			3 DAY FULL CAMP			4 DAY FULL CAMP			5 DAY FULL CAMP			
# Children	Member	Non	# Children	Member	Non	#Children	Member	Non	#Children	Member	Non	
1	\$90	\$110	1	\$135	\$155	1	\$162	\$182	1	\$202	\$222	
2	10%	\$162	\$182	2	10%	\$243	\$263	2	10%	\$291	\$311	
3	10%	\$243	\$263	3	10%	\$364	\$384	3	10%	\$437	\$457	
									3	10%	\$545	\$565

Advanced registration is strongly recommended. Please register your child(ren) with a \$50 per child deposit.

12 OPEN SPOTS FOR 8-12 YRS & 12 SPOTS FOR 4-7

Deposits are non-refundable and non-transferable

Please return the registration form, and your deposit to: anmarie.caprio@theworkoutclub.com
or call with a credit card 603-894-8400 ext 102

CAMP PAID IN FULL PRIOR TO CAMP START DATE

REGISTRATION FORM

MEMBERS & NON MEMBERS

<u>CAMP</u>	FULL	HALF
Monday, April 24 th	_____	_____
Tuesday, April 25 th	_____	_____
Wednesday, April 26 th	_____	_____
Thursday, April 27 th	_____	_____
Friday, April 28 th	_____	_____



MEMBER



NON-MEMBER

Payment must be made before child enters camp

Child(rens) Name: _____ Sibling _____

Ages/DOB _____

Address: _____ Town: _____

State: _____ Zip Code: _____

Parent/Guardians: _____ Home Phone: _____

Email Address: _____ Cell Phone: _____

Pickup: _____

Emergency Contact:

Name: _____ Phone: _____

Relationship to Child _____

Notes: _____

Deposit\$ _____

TOTAL DUE? _____

PAID IN FULL

Please print 3 receipts: 1 register, 1 for customer and 1 for my records

Circle One: CASH _____ CHECK _____ CREDIT CARD _____ BY PHONE: _____

If Credit Card, complete next section:

Circle One: MC _____ Visa _____ Discover # _____ Exp Date _____

(Please refer to camp booklet on what to bring and what not to bring)