

****Please complete and return to EncoreGym office IMMEDIATELY ****

Summer Camp Payment Agreement 2016

Camper #1 Name: _____ Camper #2 Name: _____

Camper #3 Name: _____

Card Holder Name: First _____ Last _____ Relation to camper _____

Billing Address: Street _____ City _____ Zip _____

Type of Card Visa MasterCard American Express Discover

Card Number _____ Expires ____/____/____

Card Holder Signature _____ Date ____/____/____

Card Holder email address (for e-receipt only) _____

I have read the Summer Camp Payment Agreement and agree to all points outlined on reverse. I have received a copy of these points for my records.

Signature _____

Date _____



Summer Camp Payment Policies

**Please Read Carefully and
Initial Each Section**

_____ A \$50 per child **non-refundable** deposit is required at time of registration per week of summer camp, per child.

_____ Billing is **automatic**. This card will be charged for the camp balance due two weeks prior to the start of each week of summer camp. Examples: if your child is registered to attend "Gymnastics Skills 1" camp, which begins on June 27, that balance will be charged to your card on June 13. If your child is registered to attend "Splash Bash" camp, which begins on August 15, that balance will be charged to your card on August 1.

_____ Any cancellations must be received at **least 14 days before** the first day of camp in order to avoid additional processing charges. Cancellations received less than two weeks prior to the start of camp will be subject to cancellation charges. No refunds will be issued after camp begins. All deposits are **non-refundable**.

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