



**Spaces Limited
Enroll Today !!**

**2010
Karate
Training Camp**

June 21-25, July 19-23, August 16-20

The Focus: The focus of the camp is to instruct campers on proper techniques and progressions involved in martial arts. The camp is specifically designed to help students of all ranks enhance and develop the necessary skills to excel at their current level and prepare them to advance to the next level. Students will be placed in groups according to age and ability. The camp has three principles all students must follow: Have Fun! Be Safe! Work Hard!

Camp Prices

Single week camp **Only \$ 275.00**
All Three Weeks **Only \$ 675.00**
(If paid in full by 5/31/10)

Black Belt Club Members

Single week camp **Only \$ 230.00**
All Three Weeks **Only \$ 570.00**
(If paid in full by 5/31/10)

***Training
and Fun !***

Camp Schedule: (Sample Schedule)

8:45am	Check in	1:30-3:00pm	Forms technique/ Games
9:00 - 9:30am	Warm up	3:00pm	Check out
9:30 - 10:30am	Technique/ Pad Drills	Thursday only:	
10:30am - 12:00pm	Pad Drills/ Games	3:00-11:45pm	Games and Fun Activities/Swim
12:00-12:30pm	Lunch	11:45pm	Lights out
12:30- 1:30pm	Forms/ Pad Drills	8:15am Friday	Wake up

Check-in: 8:45 AM each morning.

Check-out: 3:00 PM each afternoon. (Except for Thursdays: all campers have a **Free** overnight option. Campers will have an afternoon and evening of fun activities. Sleep in the gym and wake up on Friday for another day of camp and fun!)

Staff: The camps head instructor is Russell O'Connor. Along with him will be Jeff Rumelhart, Sean Breen, Kyle O'Connor, and Nathan James. Actual instructors may vary depending on week and day of the camp.

Medical Consent & Release of Liability: Each camper MUST fill out a Medical Consent & Release of Liability Form. Campers will not be permitted to participate if we do not have a signed form. If one is not attached to this flyer, one can be downloaded from our website www.abkfun.com and submitted to:

Location and Facilities:

America's Best Kids Sports Center: 1914 Skypark Dr. Medford, OR 97504

541-245-0432 customerservice@abkkids.com

What to Bring: All campers will need to bring: workout clothes, weapons and sparring gear (if the student has them), snack and lunch daily. On Thursday, those wishing to stay the night will need to bring: swim suit, towel, sleeping bag, pillow and toiletries. Students do not need to bring their uniforms.

Meals: Dinner will be provided on Thursday night and breakfast will be provided on Friday morning for those who choose to stay the night.

Extended Care: 7:30-9:00am and 3:00-6:00pm extended care available with our regular summer camp staff. Cost: A.M. Extended Care \$15/week and P.M. Extended Care \$25/week. Extended Care must be pre-registered and pre-paid at the time of registration.

Class Instruction: Classes will consist of curriculum, pad work, sparring drills, weapons for those who use them, video, and specialty items. In addition students will have the opportunity to swim during the overnighter and participate in fun activities.

How to Register: Please stop by the front desk and fill out the attached registration form: A minimum, non-refundable deposit of \$50 per enrolled camp week is due with your application. **BALANCE IS DUE BY: June 1st for June camps, July 1st for July camps, and August 1st for August camps.**

Cancellation Policy: A \$50 service fee will be charged for each week canceled. No refunds are granted within one week of the camp start date.

*Don't hesitate! Camp space is limited and fills quickly!
For further information call (541) 245-0432 ext 312 or email
roconnor@abkkids.com*

ABK's 2010 Karate Training Camp

Child's Name _____

Age _____ DOB _____

Belt Rank: _____

Parent's Name(s): _____

Phone _____ Cell _____ Work _____

Phone _____ Cell _____ Work _____

Address _____

City _____ ST _____ Zip _____

People authorized to pick up your child

Name Phone

Name Phone

Medications or Medical Conditions

What do you want to work most?

Release of Liability. I understand that strict observation by me, of the rules and regulations of America's Best Kids, America's Best Karate of South Medford, LLC, as well as all affiliates of America's Best Kids, Inc including the use of protective equipment, will largely eliminate the possibility of accident or injury, and I hereby represent that I am physically fit to take the prescribed course of instruction and that I have had an opportunity to observe and/or participate in lessons prior to the signing of this agreement. I have chosen and voluntarily agree to use the facilities, equipment and resources provided by America's Best Kids at my own risk with knowledge of the risks involved. I further understand and agree that I release from liability and waive any and all claims or actions for personal injury or death or property damage or loss against America's Best Kids, its owners, officers, operators, employees and affiliated persons, whether caused by the fault, negligence, omission, or any other act however caused, of America's Best Kids, America's Best Karate of South Medford, LLC, as well as all affiliates of America's Best Kids, Inc I have read and understand the above:

(If not 18 must be signed by parent or guardian)

<p style="text-align: center;">Camps Attending: June July Aug. (Please Circle)</p> <p>Credit Card Payments Please Call 245-0432</p>	<p>Camp Total: _____</p> <p>Deposit: _____</p> <p>Ext Care _____</p> <p>Balance _____</p>
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Emergency Contact (other than parent or guardian)

Name (1) _____

Relation _____

Phone No. _____

Alt. No. _____

Name (2) _____

Relation _____

Phone No. _____

Alt. No. _____

Health Information

Physician's Name _____

Phone _____

Insurance Company _____

Policy # _____ Group #: _____

Name of Insured _____

Medical Authorization: I hereby authorize the staff of America's Best Kids, America's Best Karate of South Medford, LLC, as well as all affiliates of America's Best Kids, Inc to act for me according to their judgment in any emergency requiring medical attention, and hereby waive and release the school and its staff from any and all liability for injuries or illness incurred while in the school. I have no knowledge of any physical impairment that may affect the above named student participation in the program and have read and understand the terms and conditions outlined in the accompanying material including the membership agreement.

X _____

(If not 18 must be signed by parent or guardian)

I agree to the terms of this agreement:

Student/Parent or Guardian

ABK Representative

Extended Care and Overnight options

Swimming Release

I hereby give America's Best Kids Sports Center Staff permission to take my child _____ swimming in America's Best Kids swimming pool. It is my understanding that at all times my child will remain on site and be supervised by an America's Best Kids Sports Center Red Cross Certified lifeguard and America's Best Kids child care staff. During the time which my child/children are swimming with camp, he/she is under the rules and regulation set forth by America's Best Kid's Sports Center.

Signature of Parent or Guardian

Date

A.M. Extended Care Hours 7:30-9:00am
P.M. Extended Care Hours 3:00-6:00pm
Extended Care must be pre-registered and pre-paid
Ext Care is non-refundable

June Extended Care
Rec campers only

AM _____ x \$15= _____

PM _____ x \$25= _____

July Extended Care
Rec campers only

AM _____ x \$15= _____

PM _____ x \$25= _____

Aug Extended Care
Rec campers only

AM _____ x \$15 = _____

PM _____ x \$25= _____

Extended Care Total \$ _____