



Twin Creeks
Country Club

2010 Summer Programs Enrollment Form

Please complete and return to the Front Desk at:

Twin Creeks Country Club 3201 Twin Creeks Club Drive Cedar Park, Texas 78613

Phone: 512-331-5900 Fax: 512-331-5565 www.twincreeksclub.com

A signed form for **each participant** is required. Please make copies or call for additional forms as needed.



Participants Name: _____

Girl _____ Boy _____ Age: _____ Date of Birth: _____

Parents Name: _____ Member Number: _____

Address: _____

City: _____ ST: _____ ZIP: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email Address: _____

Payment, Please check: _____ Member Charge _____ Check (Payable to Twin Creeks Country Club)

_____ Visa/MC/Discover#: _____ Exp Date _____

Circle Camps Attending:	Please Check Selected Dates:
Camp Twin Creeks (Select week attending and AM or PM for ½ day and full day sessions)	<input type="checkbox"/> June 7-11 <input type="checkbox"/> June 14-18 <input type="checkbox"/> June 21-25 <input type="checkbox"/> June 28-July 2 <input type="checkbox"/> July 5-9 ___ AM ___ PM ___ AM ___ PM ___ AM ___ PM ___ AM ___ PM ___ AM ___ PM <input type="checkbox"/> July 12-16 <input type="checkbox"/> July 19-23 <input type="checkbox"/> July 26-30 <input type="checkbox"/> August 2-6 <input type="checkbox"/> August 9-13 ___ AM ___ PM ___ AM ___ PM ___ AM ___ PM ___ AM ___ PM ___ AM ___ PM
Tot Camp	<input type="checkbox"/> June 7-11 <input type="checkbox"/> June 14-18 <input type="checkbox"/> June 21-25 <input type="checkbox"/> June 28-July 2 <input type="checkbox"/> July 5-9 <input type="checkbox"/> July 12-16 <input type="checkbox"/> July 19-23 <input type="checkbox"/> July 26-30 <input type="checkbox"/> August 2-6 <input type="checkbox"/> August 9-13
Tennis Camp (at River Place)	<input type="checkbox"/> June 21-July 2 <input type="checkbox"/> July 19-30 <input type="checkbox"/> August 16-20
Golf Camp	<input type="checkbox"/> June 14-17(ages 5-9) <input type="checkbox"/> June 21-24(ages 10&up) <input type="checkbox"/> July 13-16(ages 5-9) <input type="checkbox"/> July 20-23(ages 10&up)
Hip Hop Camp	<input type="checkbox"/> July 19-23 <input type="checkbox"/> August 2-6
Cooking Camp	<input type="checkbox"/> June 8-11 <input type="checkbox"/> July 6-9 <input type="checkbox"/> August 10-13
Magic Camp	<input type="checkbox"/> June 21-25 <input type="checkbox"/> July 26-30
Computer Explorers Camps	<input type="checkbox"/> Alien Invasion <input type="checkbox"/> Intro to Robotics & Programming <input type="checkbox"/> Engineering with LEGOs 1 <input type="checkbox"/> Engineering with LEGOs 2
Rock Camp	<input type="checkbox"/> June 28-July 2 <input type="checkbox"/> August 2-6
Spanish Camp	Ages 3 ½ -5: <input type="checkbox"/> July 5-9 <input type="checkbox"/> July 19-23 Ages 6-9: <input type="checkbox"/> July 5-9 <input type="checkbox"/> July 19-23
Clinics/Classes:	
Tennis Clinics (at River Place)	<input type="checkbox"/> June 7-17 <input type="checkbox"/> July 5-15 <input type="checkbox"/> August 2-12 <input type="checkbox"/> Please Contact me for more information on the Advantage Doyle Tennis Academy
Golf Clinics (Select Days & Clinic package)	Beginner: <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Sat <input type="checkbox"/> per clinic <input type="checkbox"/> one clinic/wk <input type="checkbox"/> monthly Intermediate: <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> per clinic <input type="checkbox"/> monthly(op.1) <input type="checkbox"/> monthly (op. 2)
TaeKwon-Do	4:30 – 6pm Tuesdays & Thursdays <input type="checkbox"/> June <input type="checkbox"/> July <input type="checkbox"/> August
Swim Lessons:	
Private Lessons (Level 1)	<input type="checkbox"/> Yes, Please contact me to arrange time(s) and date(s) for lesson(s)
Group Lessons (Select Level & Dates)	<input type="checkbox"/> Level 2 (11:15-11:45am) <input type="checkbox"/> Level 3 (12-12:30pm) <input type="checkbox"/> Level 4 (12:45-1:15pm) <input type="checkbox"/> June 8-18 <input type="checkbox"/> June 22-July 2 <input type="checkbox"/> July 13-23

**Unregistered campers will be required to pay an additional \$25 walk-in fee. * Camp cancellations must be made 7 days in advance. 48 hours or less cancellation will be charged 50% of camp fee. *Please fill out and return the medical release form with your application.*

Parent's Signature: _____ Date _____



*Medical Release Form
Twin Creeks Country Club
2010*

I _____ (parent/guardian's name)

hereby give my permission for any and all medical attention to be

administered to my child _____(child's name)

in the event of accident, injury, sickness, etc. I also assume the

responsibility for the payment of any such treatment.

Physician Name: _____

Physician Phone Number: _____

Known Allergies: _____

Medications: _____

Date: _____ Signature: _____

****This form must be completed and turned in with Camp registration form.
One form per child.***

****If attending Camp Twin Creeks, a copy of your child's current shot records will
also need to be turned in by their 1st day of camp.***