



2025 DCC SPORTS CAMP REGISTRATION FORM

Thank you for your interest in DCC's Sports Camp. Summer will be here before you know it! We always look forward to providing your children with a fun-filled summer and cannot wait for camp to begin. Please complete this application in its entirety to secure your child's space at camp!

Enrollment

Sports Camp is limited to (60) spots per week. Please note that junior members of DCC receive priority until **Friday, May 2nd, 2025**. All registrations must be submitted one week prior to camp beginning. We will not be able to accommodate any adjustments to enrollment the week-of. DuPont Country Club Sports Camp Cancellations must be made at least one week prior to the date you have registered for and must be submitted via email to DCC.Events@dupontcc.com. Any cancellations received after the one-week deadline will be charged the full amount.

Ages

Children between the ages of 5 to 12 are eligible for the DuPont Country Club Sports Camp. All children must have completed their kindergarten year of school and capable of self-care. Children will be grouped with other campers similar in age.

Camp Dates

Week 1: June 9 th – 13 th	Week 5: July 7 th – 11 th	Week 9: August 4 th – 8 th
Week 2: June 16 th – 20 th	Week 6: July 14 th – 18 th	Week 10: August 11 th – 15 th
Week 3: June 23 rd – 27 th	Week 7: July 21 st – 25 th	Week 11: August 18 th – 22 nd
Week 4: June 30 th – July 3 rd *	Week 8: July 28 th – Aug. 1 st	<i>*Prorated week</i>

Camper Name								
	FIRST		MIDDLE			LAST		
Gender:					Birthdate:		Age (as of 6/1/25)	
T-Shirt Size:	XS	SM	M	L	XL	Select One:	Youth	Adult

Camper Name								
	FIRST		MIDDLE			LAST		
Gender:					Birthdate:		Age (as of 6/1/25)	
T-Shirt Size:	XS	SM	M	L	XL	Select One:	Youth	Adult

Camper Name								
	FIRST		MIDDLE			LAST		
Gender:					Birthdate:		Age (as of 6/1/25)	
T-Shirt Size:	XS	SM	M	L	XL	Select One:	Youth	Adult

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RELEASE OF MINORS

- Children are released at the end of camp to those listed as an Emergency Contact or one of the individuals listed below unless directed by a court to do otherwise.
- Any changes will need to be in writing and provided by either the parent or guardian to the camp office.
- Children must be dropped off and picked up at the camp location. Campers CAN NOT be dropped off or picked up at any alternate locations.
- Anyone picking up the camper MUST be at least 18 years of age.

* Photo identification is required of everyone at the time of pick-up. *

Parent or Guardian No. 1					
	FIRST NAME		LAST NAME		
STREET ADDRESS		CITY	STATE	ZIP CODE	PRIMARY PHONE
SECONDARY PHONE			EMAIL		

Parent or Guardian No. 2					
	FIRST NAME		LAST NAME		
STREET ADDRESS		CITY	STATE	ZIP CODE	PRIMARY PHONE
SECONDARY PHONE			EMAIL		

Emergency Contact Information

ALTERNATE PICKUP/RELEASE

NAME	RELATIONSHIP TO CAMPER	PRIMARY PHONE	SECONDARY PHONE
NAME	RELATIONSHIP TO CAMPER	PRIMARY PHONE	SECONDARY PHONE
NAME	RELATIONSHIP TO CAMPER	PRIMARY PHONE	SECONDARY PHONE

Please list those people in addition to the above who are permitted to pick-up your child_(optional):

1. _____
2. _____
3. _____

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CAMP SESSION SELECTION

Please check the boxes corresponding to your care needs for the summer:

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11
Half Day AM											
Full Day											
Half Day PM											
Extended Care*											

***Extended Care is only available for Sports Camp attendees. We cannot transport children from Before Care to Golf or Tennis Half-Day Camps at the DuPont Country Club.**

Extended Care runs from 7:30am to 8:45am & 4:15pm to 5:30pm. Picking up after 5:30pm will incur an additional \$25 charge per occurrence. *Children not registered for extended care picked up after 4:20pm will incur an additional charge of \$50 per occurrence.*

Enter dates for "Daily" camp days below:

Please be advised that the camper must be an active DCC Member to qualify for the Member Rates.

DCC Members

Full Week: \$450
 Half Day: \$275
 Per Day: \$145
 Per Half-Day: \$95
 Extended Care: \$100 Per Week

Non-Members

Full Week: \$525
 Half Day: \$320
 Per Day: \$160
 Per Half-Day: \$110
 Extended Care: \$100 Per Week

My Child is attending (select one):	Half-Day Tennis Camp		Half-Day Golf Camp	
Camper(s) will join Sports Camp at Lunch. Registration for sport-specific camps is handled through the corresponding department.				

Discounts!

- Discount must be marked to be applied & will not be retroactively applied.
- Discounts are only applicable for **FULL WEEK** (Monday – Friday) enrollment. Includes Half-Day Enrollment.

Sibling (\$25 off/week)	
Multi-Week (\$25 off/week)	
Early Bird Discount (Sign-up by April 1st – \$10 off/week)	

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PAYMENT INFORMATION

Charge to an active DCC Membership:	
NAME ON ACCOUNT	MEMBER NUMBER

Charge to my Credit Card ALL CREDIT TRANSACTIONS WILL BE ASSESSED A 2% PROCESSING FEE:											
NAME ON CARD	CREDIT CARD NUMBER										
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SELECT CARD TYPE	EXPIRATION DATE										

SWIMMING & POOL USAGE

Each group will have the opportunity to swim daily. Your child must pass a swim test to be permitted to swim in the main pool, which is supervised by DCC Lifeguards and Sports Camp Staff. A swim test will be administered every Monday throughout the summer.

The Wade Pool is only permitted to be used by our campers ages 6 and younger. If you would prefer for your child to not participate in their swim session, they will be able to participate in an alternate activity during that time. ***We are able to provide life jackets, however, flotation devices brought from home are not permitted.***

SWIMMING PERMISSION SLIP

PLEASE COMPLETE THIS FORM. THIS FORM MUST BE ON FILE BEFORE YOUR CHILD WILL BE ALLOWED TO SWIM.

CAMPER NAME(S):		
	<p>MAIN SWIMMING POOL – I allow my child to use the main pool upon passing the swim test. *A swim test will be administered by lifeguard staff to verify swimming ability and area(s) in the Main Pool in which your child may swim (Shallow or Deep). The Main Pool is supervised by Lifeguards and Camp Staff during swim time.</p>	
	<p>WADE POOL – I allow my child to use the Wade Pool only. The Wade Pool is supervised by Camp Staff during swim time. The Wade Pool is only for the usage of children ages 6 and below.</p>	
	<p>I would prefer my child TO NOT SWIM (Alternate, supervised activities will be held as an alternative option to swimming)</p>	
PARENT OR GUARDIAN SIGNATURE		DATE

MEDICAL RELEASE INFORMATION

INSURANCE INFORMATION

POLICY NUMBER	NAME OF INSURANCE PROVIDER
PRIMARY PHYSICIAN	STREET ADDRESS
PHONE	CITY STATE ZIP CODE

Please list any current medical conditions, including any requiring maintenance medication (i.e., Diabetic, Asthma, Seizures).

Medical Condition	Required Treatment	Should paramedics be called?	
		Yes	No
		Yes	No
		Yes	No

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?

Yes No If yes, explain: _____

Is your child allergic to any type of food or medication?

Yes No If yes, explain: _____

Does your child require a special diet?

Yes No If yes, explain: _____

The purpose of the above listed information is to ensure that medical personnel have details of any medical problem which may interfere with or alter treatment.

I understand that I will be notified in the case of a medical emergency involving my child. If I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

Parent or Guardian Initials _____

In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e., EMT, First Responder, and/or Physician). I understand that the DuPont Country Club will not be responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

Parent or Guardian Initials _____



ACCIDENT WAIVER & RELEASE OF LIABILITY FORM

I hereby give my permission for my child _____ to participate in the DuPont Country Club Sports Camp.

I understand that camp activities could include play and outdoor activities around and near the DuPont Country Club grounds, hikes and walks in the uneven territory wherein there could be mosquitos, bees, ticks, poison ivy, and slippery and jagged surfaces among other dangers and risks. I also understand that outdoor activities may occur in the hot sun and in the rain. I agree to see that my child is appropriately attired for camp activities, and to provide insect repellent and sunscreen for my child to use at camp. I will not expect the DuPont Country Club Sports Camp staff to provide these items. I give my permission for DuPont Country Club Sports Camp staff to apply or assist with the application of the repellent and sunscreen I provide.

In the event of illness, injury, and/or accident, I authorize the camp instructor or any DuPont Country Club staff member to act on my behalf. They may approve any and all non-emergency or emergency treatment and are authorized to sign any and all medical release or required form(s) on my behalf. In the event of an emergency, I understand that I will be notified of the situation as soon as practicable. I agree to pay any necessary expenses incurred in the medical treatment of my child, including, but not limited to all transportation costs to and from a medical facility, and, if necessary, transportation to my home or medical facility of choice.

I understand that the DuPont Country Club may, in its sole discretion, dismiss any camp participant for inappropriate, disrespectful, or dangerous behavior at any time. In this event, I understand that I will not receive a refund of camp fees for unattended days. If my child breaks or damages any property as a result of their direct or indirect behavior, I hereby agree to pay for its repair or replacement.

I understand that the risks associated with camp activities could result in injury and/or death to my child. I hereby assume these risks and, knowing them, hereby give my child permission to participate. I understand that the DuPont Country Club is not liable for any injuries or other occurrences due to indoor and outdoor camp activities or related risks, and/or the actions or omissions of DuPont Country Club & Sports Camp counselors, volunteers, employees, directors, officers, or any other entities being released.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activity in which my child may participate, and that it will govern the actions and responsibilities at said activity.

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In consideration of my application and permitting my child to participate in this activity, I hereby:

WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the DuPont Country Club, its directors, officers, employees, camp counselors, volunteers, entities or other persons released, for my child’s death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to them including their traveling to and from this activity;

INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the DuPont Country Club, its directors, officers, employees, volunteers, or other entities or persons released from any and all liabilities or claims made as a result of participation in this activity, whether caused by the negligence of release or otherwise.

I understand that while participating in this activity, my child may be photographed. I agree to allow their photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. The DuPont Country Club, its directors, officers, and all its employees, acting officially or otherwise are hereby released from any and all claims, demands, actions, or causes of action on account of any injury to my child that may occur. This release binds my heirs, executors, administrators, and/or assigns.

I understand that I must submit a written request to allow my child to use the Club facilities after Sports Camp ends each day (e.g. Swim Team).

I CERTIFY THAT I HAVE READ THIS DOCUMENT IN ITS ENTIRETY, FULLY UNDERSTAND ITS CONTENT, AND AGREE TO ITS TERMS.

Parent or Guardian Printed Name: _____

Parent or Guardian Signature: _____ **Date:** _____