

#### **ACTIVITIES** INCLUDE:

- **★** Swimming
- ★ Beach Fun
- ★ Scavenger Hunt
- ★ Kite Flying
- ★ Arts & Crafts
- ★ Obstacle Course
- ★ Soccer
- ★ Postcard Making
- **★** Dodgeball
- **★** Tennis
- **★** Water Sports
- **★** Cooking Class

#### and many more...

#### **SCHEDULE**

★ Days: Monday - Friday★ Times: 8:00 am - 5:00 pm

★ Drop off: 8:00 am (early drop off 7:30 am)

★ Drop off and pick up: Port 2 (Premier Tower Entrance)

★ Ages 5 to 12 years old

★ Summer Camp Room: Koko Room



#### 2017 SESSION DATES

★ Week 1 : June 5 - June 9★ Week 2 : June 12 - June 16

★ Week 3 : June 19 - June 23

★ Week 4 : June 26 - June 30

★ Week 5 : July 3 - July 7

★ Week 6 : July 10 - July 14

★ Week 7 : July 17 - July 21

★ Week 8 : July 24 - July 28

★ Week 9 : July 31 - August 4

★ Week 10: August 7 - August 11



## LIMITED SPACE AVAILABLE

Kids must register the Friday prior to the week attending.

Please submit completed form and payment to Wellness Center.

#### FOR MORE INFORMATION, CALL THE

Hilton Wellness Center at 646-1835 ext. 5885



### REGISTRATION FORM

CHILD 1

STAFF INITIAL:	
AMOUNT PAID:	
DATE PAID:	
RECEIPT #:	

CHILD 3

HILTON KIDS RESORT SUMMER 2017

NAME:	NAME:	NAME:		
DATE OF BIRTH:	DATE OF BIRTH:	DATE OF BIRTH:		
Is your child able to swim?	Is your child able to swim?	Is your child able to swim?		
Any allergies?	Any allergies?	Any allergies?		
Any medication?	Any medication?	Any medication?		
Any physical/medical conditions?	Any physical/medical conditions?	Any physical/medical conditions?		
Any special instructions?	Any special instructions?	Any special instructions?		
PARENT INFORMATION				
PARENT NAMES:	ENROLLED WEEKS:			
CONTACT NUMBERS:	HOME ADDRESS:			
CONTACT NOIVIBERS.	HOWL ADDRESS.			
MAILING ADDRESS:	EMAIL ADDRESS:			
INDEMNITY AGREEMENT				
I certify above information is correct. On behalf of the child(ren) above, I hearby release, indemnify and hold harmless Hilton Guam Resort & Spa from any claim made against it arising from any occurrence in relation to the Hilton Kids Resort Program, except for willful miscounduct or gross negligence. In the event I cannot be contacted to make arrangements for emergency medical attention at the time of an illness or accident, I hereby authorize Hilton Guam Resort & Spa to take my child to the hospital or medical facility of their choice. I have carefully read this indemnity agreement prior to its execution and I fully understand its contents.				
Parent signature Date	Parent signature	Date		

CHILD 2

Late Pick-up: You may drop off your child as early as 7:30am and pick up no later than 5:00pm. There will be a \$25 charge for late pick up after 5:00pm and an additional \$25 for every 30 minutes there after.

- Refund Policy: No Refunds or Make Up Days. All Sales Are Final.
- Special Rate. Hilton Kids Resort is a local promotion. Each five-day session is available at a rate of \$175 per child. Should you decide to enroll your child only a few days, we will extend our in-house guest rate of \$80 per child per day. Partial sessions will not be prorated.

  • Program Minimum Class Requirement: Hilton Guam Resort & Spa reserves the right to terminate the program should the minimum slots of five children not be filled. All outstanding program fees will be refunded.
- Happy Kids Resort Policy: Vulgar language, bullying, fighting, or any other form of violence will not be tolerated. Children must adhere to camp rules at all times. Parents will be contacted immediately and may be released from the program for serious incidents.
- Preparing Your Child: Children are not permitted to bring any valuable items. Hilton Guam Resort & Spa will not be held liable for any lost personal property. Hilton Kids Resort is an indoor/outdoor program. All participants should bring swimwear, sports wear, tennis shoes, flip flops, sunscreen, and a dry change of clothes. Swimming Goggles are recommended. Lifejackets and towels will be provided. Any special dietary requirements or restraints must be communicated. Hilton Kids Resort is a high energy recreation program. Please ensure that your child has a healthy breakfast before morning drop off. Children will receive a healthy lunch at 11:00am and a healthy snack at 3:00pm.

# **WAIVER AND** RELEASE FORM

HILTON KIDS RESORT SUMMER 2017

#### Waiver and Release from Liability for Child

I hereby waive and release, hold harmless and forever discharge Hilton Guam Resort & Spa Recreation and Wellness Center, Hilton Guam Kids Resort and all its agents, employees, and affiliates, of and from all claims, demands, causes of action damages and liability of every and any kind and nature, arising from or in any way related to the utilization/participation of my child (listed below) in the Hilton Guam Kids Resort Program of the Hilton Guam Resort & Spa (further referred to as Company).

Initial: I understand that the activities in which I will allow my child(ren) to participate are inherently dangerous and can cause serious injury including bodily injury, damage to personal property and/or death. I and/or my heirs and/or representatives waive all claims of injury to Child's body and or his/her property and death that I and/or my heirs and/or representatives may have against the aforementioned company pertaining to such activity, including claims in tort, contract, equity, or otherwise. My signature is proof of my intention to execute a complete and unconditional waiver and release of all liability to the fullest extent of the law for my Child to participate in the Hilton Guam Kids Resort Program at the Hilton Guam Resort & Spa Wellness Center, Tennis Center, & Resopa Water Park. Initial: Parents will be responsible for putting sunblock on their child prior to dropping off to camp. Initial: Child: (Print Name) Parent or Legal Guardian (print) Signature Mailing Address:\_\_\_\_ Email Address:\_\_\_\_\_

Phone No.:\_\_\_\_\_

# AUTHORIZATION PICK UP FORM

HILTON KIDS RESORT SUMMER 2017

PARENT INFORMATION		
PARENT NAMES:		
PHONE NUMBER:		
	AUTHORIZED PICK UP #1 (MUST PRESENT ID UPON PICKUP)	
NAMES:		
NUMBER:	RELATIONSHIP TO CHILD:	
AUTHORIZED PICK UP #2 (MUST PRESENT ID UPON PICKUP)		
NAMES:		
NUMBER:	RELATIONSHIP TO CHILD:	
AUTHORIZED PICK UP #3 (MUST PRESENT ID UPON PICKUP)		
NAMES:		
NUMBER:	RELATIONSHIP TO CHILD:	
I AUTHORIZE THE ABOVE INDIVIDUALS TO PICK UP MY CHILD		
	(ID REQUIRED TO PICK UP CHILD)	
SIGNATURE:		