Genesis Racquet Club
Change Form

☐ MEMBER
☐ NON-MEMBER

Team Member Name:

Date Received:

Camper Name:

Cancellations

Camp Weeks		M-F	MWF	TTh	M	T	W	Th	F
1	May 24 - 28								
2	Jun 1 - 4		x		x				
3	Jun 7 - 11								
4	Jun 14 - 18								
5	Jun 21 - 25								
6	Jun 28- Jul 2								
7	Jul 5 - 9								
8	Jul 12 - 16								
9	Jul 19 - 23								
10	Jul 26 - Jul 30								
11	Aug 2 - 6								
12	Aug 9 - 13								

PROGRAM CANCELLATION POLICY:

Two weeks prior to the start of the cancelled week (Monday at 9am), schedule changes can be made free of charge by emailing an electronic Change Form to ashton.may@genesishealthclubs.com

On or after the deadline, refunds for camp fees will only be processed if a child on the waitlist can take the cancelling child's spot in camp. If the requested cancellation date cannot be filled by a waitlist camper, the spot in camp will remain reserved for the enrolled camper and therefore a refund will not be processed. There is a $25 processing fee for Change Forms processed after the deadline. Change Forms will only be processed if a child on the waitlist can take the cancelling child's spot in camp.

Cancellation Due to Camper Sickness:
To support with daily operations, although a refund is not warranted, parents are asked to call the Front Desk at 402.413.1085 Ext:706 to ensure clarity.
If a participant becomes ill during the program day the participant's parents will be notified. The team leader will communicate with the participant's parents to arrange a pick up. If a camper departs early due to illness no portion of the program fees is refundable.

Additions

Camp Weeks		M-F	MWF	TTh	M	T	W	Th	F
1	May 24 - 28								
2	Jun 1 - 4		x		x				
3	Jun 7 - 11								
4	Jun 14 - 18								
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Camp Pricing:

	Member	Non-Member
M-F	$ 170	$ 190
MWF	$ 117	$ 126
T/Th	$ 86	$ 96
Single Day	$ 43	$ 48

Team Member Use:

Date Processed: _____

Processed By: _____

Parent Name: _____

Parent Signature: _____

Date: /   /