

SUMMER CAMP REGISTRATION FORM

Registration Forms must be completed and turned in prior to the first day of camp in order for your child to participate. Please email the completed forms to contact@texasgunclub.com or bring on the first day of class.

Participant Information

First Name	Last Name	Gender
Date of Birth (day, month, year)	Age	Grade in fall 2019
Home Phone	Family email	
Mailing Address		
Street Address (if different from above)		
Parent/Guardian 1 Name (first/last)	Cell Phone	Work Phone
Parent/Guardian 2 Name (first/last)	Cell Phone	Work Phone
Emergency Contact Name (other than parent/guardian)		Phone
Please list the name of anyone who is authorized to pick your child up from camp		
Medical issues, daily medications or special needs		

REFUND POLICY: Refunds will be authorized by Texas Gun Club only.

As a participant in the above program, I recognize and acknowledge that there are certain risks of physical injury. I agree to assume the full risk of any injuries, damages or loss which I or my child may sustain as a result of such participation. I further understand that Texas Gun Club does not provide accidental medical coverage and it is my responsibility to provide appropriate coverage. I agree to waive and relinquish all claims and hold harmless Texas Gun Club, it's officers, agents, and employees from any and all claims.

Signature (Parent/Guardian): _____ **Date:** _____

Signature (Parent/Guardian): _____ **Date:** _____

STUDENT MEDICAL RELEASE FORM

Please print all information clearly

The medical background of each student is required as part of the camp’s registration process. The instructor must be advised in writing of any condition that would limit the student’s ability to participate in any program.

First and Last Name		Date of Birth (day, month, year)
Child’s Pediatrician’s Name		Phone number
Date of last physical	Medical conditions	
List of past medical treatments		
List all current medications regardless of whether it needs to be taken at camp or not		
Will your child need to take any prescription medication while at camp? Yes/No	If yes, please request a medical dispensing form. Return the form and medication in a ziplock bag with your child’s name on it on the first day that they attend camp.	
Allergies: (Please put N/A if your child does not have an allergy)		
Food: Medication: Insect: Other:		
Does your child require an Epi-pen? Yes/No	If yes, you must provide the camp with an Epi-pen to be kept on the premises while your child is in our care. Epi-pen must be accompanied with a current prescription and a doctor’s note.	
Specific activities to be restricted for health reasons:		

PARENT AUTHORIZATION FORM

Please print all information clearly

NAME OF CAMPER: _____ TODAY'S DATE:

Texas Gun Club does not discriminate on the basis of race, color, sex, handicap, religion or national origin. Texas Gun Club reserves the right at its sole discretion to refuse an application or dismiss a child from camp. No refund will be made of fees if the child has attended any portion of the training period.

Parent/Guardian's Signature: I understand and accept these guidelines

Parent/Guardian/s Signature: _____

I give Texas Gun Club permission to photograph and/or videotape my child for public relations and/or marketing purposes. Photos will remain archived at Texas Gun Club and can be used for promotional purposes without notification. No names will ever be used to identify students.

Parent/Guardian/s Signature: _____

I give permission for Texas Gun Club to transport my child off camp property for the purpose of medical care. I understand that a schedule of events will be available to me and that all events are subject to change due to weather and/or scheduling conflicts without notice.

Parent/Guardian/s Signature: _____

I authorize the camp management to act as the agent of the parents in any emergency situation or to administer basic first aid for the health and welfare of the camper involved. I am responsible for the expenses involved if the services of a physician or hospital are required. Please request a waiver for persons requesting an exemption from medical treatment.

Parent/Guardian/s Signature: _____

Hospital preferred if any: _____

By signing below, I agree to adhere to all the Policies and Procedures set for by Texas Gun Club.

Parent/Guardian/s Signature: _____

ITINERARY

DAY 1

INTRO TO HANDGUN SAFETY AND SHOOTING

DAY 2

ADVANCE HANDGUN MANIPULATION
LEARNING HOW TO DRAW FROM THE HOLSTER
SIMULATOR
RANGE

DAY 3

INTRO TO PRACTICAL PISTOL (IDPA)
SHOOT THREE IDPA STAGES

DAY 4

STEEL CHALLENGE DEMO BY 14YR OLD GRAND MASTER STEEL CHALLENGE SHOOTER, ALORA
INTRO TO STEEL CHALLENGE
SHOOT STEEL CHALLENGE

DAY 5

AREA 59 STEEL CHALLENGE MATCH

WHAT TO BRING

This Form! Please make sure to bring these completed forms on your first day of class, or email them to contact@texasgunclub.com prior to the first day of camp.

Notebook and writing utensil for taking notes during class time.

Closed toed shoes. We require closed toed shoes on the range at all times. Speaking of range requirements, go ahead and read through the rest of our [range rules](#) before camp.

A light jacket or hoodie. It sometimes gets a little cold in the classroom and on the range.