

CAMP SHANE PRESENTS
SHANEdiet
 & LIFESTYLE RESORTS

AT THE HONOR'S HAVEN RESORT & SPA

SUMMER OFFICE: 302 HARRIS ROAD, FERNDALE NY 12734 (845) 292-4644
 WINTER OFFICE: 134 TEATOWN ROAD, CROTON ON HUDSON NY 10520 (914) 271-4141
 HONOR'S HAVEN RESORT: 1195 ARROWHEAD ROAD, ELLENVILLE, NY 12428 (866) 345-6028

PLEASE PRINT &
 COMPLETE ALL

ADULT PROGRAM FOR AGES 26+
CONTRACT OF ENROLLMENT 2010

Winter Fax: (914) 271-2103
 Summer Fax: (845) 292-8636

Male Female Name: Birth Date/...../.....
 Guest will be: years: months of age as of June 21st, 2010. Height: Weight:
 Address: City: State: Zip:
 Home: (.....)..... Work: (.....)..... Cell: (.....).....
 Email: Alternate Email:.....

Emergency Contact:

Name: Relationship:
 Address City State Zip
 Home: (.....)..... Cell: (.....)..... Work: (.....).....

How did you first learn about us? Internet. Which search engine Other

Health Insurance:

Health Insurance Co. Group # Policy # Rx #
 Address City State Zip

1. Select the sessions you wish to attend

- Week 1 June 20 - June 27
- Week 2 June 27 - July 4
- Week 3 July 4 - July 11
- Week 4 July 11 - July 18
- Week 5 July 18 - July 25
- Week 6 July 25 - August 1
- Week 7 August 1 - August 8
- Week 8 August 8 - August 15

Rates **inclusive** of tax and service charges

2. Select the cost for total weeks and occupancy you prefer

Total Weeks Attending	Double Occupancy *If available		Single Occupancy	
	Weekly Rate	Total Cost	Weekly Rate	Total Cost
1	\$1,750	<input type="checkbox"/> \$ 1,750	\$2,200	<input type="checkbox"/> \$ 2,200
2	\$1,750	<input type="checkbox"/> \$ 3,500	\$2,200	<input type="checkbox"/> \$ 4,400
3	\$1,700	<input type="checkbox"/> \$ 5,100	\$2,150	<input type="checkbox"/> \$ 6,450
4	\$1,700	<input type="checkbox"/> \$ 6,800	\$2,150	<input type="checkbox"/> \$ 8,600
5	\$1,650	<input type="checkbox"/> \$ 8,250	\$2,100	<input type="checkbox"/> \$10,500
6	\$1,650	<input type="checkbox"/> \$ 9,900	\$2,100	<input type="checkbox"/> \$12,600
7	\$1,600	<input type="checkbox"/> \$11,200	\$2,050	<input type="checkbox"/> \$14,350
8	\$1,600	<input type="checkbox"/> \$12,800	\$2,050	<input type="checkbox"/> \$16,400

Transportation:

- CAR
 I will provide my own transportation To From Honor's Haven Resort & Spa
- AIRPORT VAN – (Arrival/departure - **Newark Airport ONLY**)
 Available only on June 20, July 4, July 18, Aug. 1 & Aug. 15 To From Honor's Haven Resort & Spa \$125.00 Each way
- PRIVATE CAR SERVICE
 (Arrival/departure – JFK, LGA, NWK or Stewart Airport) To From Honor's Haven Resort & Spa \$250.00 Each way (approx.)

Please send us this signed Contract of Enrollment along with your deposit of \$500 made payable to Shane Diet Resorts.
 Balance is due April 30th. If Contract is submitted after April 30th, payment in full is due with the signed Contract.

SIGNATURE REQUIRED ON REVERSE SIDE

RECVD	S/T	QB	SENT
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1. This Contract with **Shane Fit LLC, a Delaware limited liability company, dba Shane Diet Resorts**, hereafter designated as Shane Diet Resorts, constitutes the full understanding of the parties and no change, modification or waiver of any of the terms shall be effective unless in writing and signed by both parties.
2. In consideration of Guest's enrollment and payment of appropriate fees, Shane Diet Resorts agrees to provide tuition and maintenance for the Guest. Tuition includes regular adult program, and room and board. Tuition fees do not include horseback riding, optional trips, laundry, and transportation of guest or luggage to or from Honor's Haven Resort & Spa.
3. Guest may participate in any activity or trip organized by the Shane Diet Resorts staff on or off Honor's Haven Resort & Spa grounds, including but not limited to fitness programs, swimming, gym, dance, yoga, water skiing, tubing, canoeing, hiking, amusement/water parks, horseback riding, transportation to activities. The Guest assumes the inherent risk of such activities and will hold Shane Diet Resorts harmless in the event of any injuries, medical bills or property damages that may result from a Shane Diet Resorts or Honor's Haven activity.
4. Shane Diet Resorts is not a medically supervised weight loss program. At their own discretion, Guest is responsible for getting clearance from their physician, as needed, to participate in the program, and for any medical needs that arise during the Guest's stay.
5. A deposit of Five Hundred Dollars (\$500) must accompany this Contract. Balance is due April 30th. All enrollments after April 30th must be paid in full. Shane Diet Resorts shall have the right to charge the credit card below for any unpaid balance when due and to receive collection and attorney's fees on any unpaid balance, plus interest, expenses and court costs, if any, in the event that Shane Diet Resorts initiates proceedings for collection on any unpaid balance due. The undersigned waives their right to reverse any credit card charges.
6. No adjustment, allowance or refund of the deposit or balance of the tuition fees shall be made except in strict conformity with the following rules:
 - A - Where a Guest notifies Shane Diet Resorts prior to April 1st that he or she will be unable to attend for any reason whatsoever, a full refund will be made of all fees previously paid less a non-refundable registration fee of \$250.
 - B - Where a Guest notifies Shane Diet Resorts more than thirty days prior to the start of the session in which the Guest is enrolled that he or she will be unable to attend for any reason whatsoever, a full refund will be made of all fees previously paid less a non-refundable registration fee of \$500.
 - C - If cancellation is due to non-payment of tuition or within 30 days of the start of the session in which the Guest is enrolled, all money received by Shane Diet Resorts will be treated as liquidated damages.
7. Due to the seasonal nature of a summer resort program, there is no refund or credit for any portion of the session not completed including late arrival, early departure, illness or accident, disability or withdrawal for any reason. Tuition and fees already paid and/or due are agreed to be the fair and reasonable sum as and for liquidated damages. All claims for refund or credit are expressly waived and released by the Guest.
8. The venue and place of trial of any dispute that may arise out of this agreement or otherwise, to which Shane Diet Resorts or its agent, is a party, shall be in the Town of Liberty Justice Court, or the County or State Supreme Court in Sullivan County, New York. In the event that Shane Diet Resorts retains the services of an attorney to enforce its rights under the terms of this Contract, if successful, whether after litigation or through settlement, Shane Diet Resorts shall be entitled to reimbursement for its reasonable legal fees and costs. In the event that any portion of this Contract is deemed void or unenforceable for any reason, it shall not affect the balance of the Contract which shall be enforced in the manner designed to give Shane Diet Resorts the fullest benefit and protection represented by this Contract.
9. Shane Diet Resorts, its officers, directors, and employees, shall not be responsible for cell phones, money, clothing, laundry, baggage, medicine, mail, packages or personal possessions lost or damaged by fire, theft, malicious mischief or personal negligence.
10. Permission is hereby granted to Shane Diet Resorts to use any photograph, film, video or audio of the above guest in any public release, publicity, TV program, advertisement, brochure or promotional videos.
11. Names and addresses of guests and staff, Guest inquiries and printed material and procedures are the confidential property of Shane Diet Resorts.
12. Shane Diet Resorts does not screen its guests and does not assume responsibility for acts by Guests or other persons, whether on or off the Honor's Haven Resort & Spa premises.

Please enroll me in Shane Diet Resorts at the Honor's Haven Resort & Spa for the sessions checked herein. I have read the Contract of Enrollment terms above, am familiar with the same and agree that this enrollment is acceptable to me and is subject to everything contained therein.

GUEST'S SIGNATURE: DATE:/...../.....

Credit/Debit Card Payments: Please complete to authorize Shane Diet Resorts to charge your account. The terms, conditions and the refund policies as per this Shane Diet Resorts Contract of Enrollment apply. This charge is non-refundable and may not be disputed under any circumstances. Checks are preferred, but credit cards may also be used for the remaining tuition payments, but since our published tuition fees reflect a 2% discount for direct payment on the remaining tuition balance, tuition balance amounts charged will be 2% higher.

Winter Fax: 914-271-2103 Summer Fax: 845-292-8636

Visa MasterCard Card #: _____ - _____ - _____ - _____ Expiration Date: ____/____

Card holder's name as it appears on the card: _____

Billing Address: _____ City: _____ State: ____ Zip: _____

_____ Initial here to automatically charge the February and April payments due (plus 3%) per payment schedule.

<input type="checkbox"/> Additional Payment	\$ _____
2% Convenience Fee	\$ _____
Subtotal	\$ _____
<input type="checkbox"/> Deposit	\$ <u>500</u>
Grand Total	\$ _____

Cardholder acknowledges that the Camp has the right to charge any unpaid balance when due and cardholder hereby waives the right to reverse any credit card charges as per this Contract.

Cardholder's signature _____