

PLEASE PRINT ALL INFORMATION. PLEASE USE A SEPARATE FORM FOR EACH CHILD.

CHILD'S Last Name _____ First _____

Address _____

City, State, Zip _____

Date of Birth _____ Male Female

School _____ Entering Grade in September 2010 _____

PARENT 1 Name _____ **PARENT 2** Name _____

Home Phone _____ Home Phone _____

Business Phone _____ Business Phone _____

Cell Phone _____ Cell Phone _____

E-mail _____ E-mail _____

Child lives with this parent

Child lives with this parent

T-Shirt size ADULT Small Medium Large XL

Please check this box if your child has food allergies

Please check this box if your child has an Individualized Education Program (IEP)

CAMP INFORMATION

Check Box	Program Name	Dates	Member Fees	Public Fees
<input type="checkbox"/>	Day Trippers (day trip camp)	Monday, June 28- Friday, July 2	\$ 400	\$ 475
<input type="checkbox"/>	Day Trippers (day trip camp)	Monday, July 12 - Friday, July 16	\$ 400	\$ 475
<input type="checkbox"/>	Adventurers (travel camp)	Monday, July 26- Friday, July 30	\$ 500	\$ 575
<input type="checkbox"/>	Day Trippers (day trip camp)	Monday, Aug 2- Friday, Aug 6	\$ 400	\$ 475
<input type="checkbox"/>	Adventurers (travel camp)	Monday, Aug 16- Friday, Aug 20	\$ 500	\$ 575

PAYMENT INFORMATION

Payment in full is due May 28, 2010

A minimum deposit of \$100/per week is due at time of registration. Payment plans are available.

Program Fees \$ _____

Deposit - \$ _____

Balance Due \$ _____

AMOUNT OF PAYMENT \$ _____

TYPE OF PAYMENT CASH Check # _____

MC VISA AMEX DISC

Card # _____ Exp _____ Code _____

Signature _____

check this box if you would like the balance charged to the card provided on May 28, 2010

SUMMERFEST
REGISTRATION CONTRACT

1. A **non-refundable \$100 deposit per week** must accompany registration forms to reserve space.
2. **Payment in full must be received by May 28, 2010.** After this date a late fee of \$25 will be added per week enrolled.
3. A Physical Examination and up-to-date Immunizations are required by June 1, 2010.
4. SUMMERFEST fees include accident insurance. There is a \$25 deductible which will be paid by the camper's family in the event that insurance is required.
5. All food items provided by JCC Rockland are Kosher. Campers are to bring a dairy sack lunch daily. Lunch can be pre-ordered through the FIT Café for Culinary Creations & Fashion camps.
6. The JCC reserves the right to remove or suspend a child from a program for just cause. Program fees will not be refunded. JCC Membership is non-refundable.
7. **Photo Release:** Program registration implies permission to use photos taken during the program for publicity purposes.
8. **Contact Information Release** I give permission for the following information to be used in a camp directory. If an item isn't checked, the information will not be provided.
 Name Address Home Phone Email
9. Permission is granted for my child to take part in all program activities on or off-site.
10. Permission is granted to the Program Administration to authorize emergency medical treatment for my child, should the need arise.
11. No camper will be admitted to camp until a fully completed and signed application, physical examination and immunization record and all other documentation has been completed and submitted to the camp administrator.
12. No camper will be permitted to attend camp unless the family's financial account is current.

Parent / Guardian Signature

Camper's Name

Date