



Country Day Camp 2010 Registration Form

PLEASE FILL OUT ENTIRE FORM (FRONT & BACK)

GENERAL INFORMATION

Child's First Name: _____ MI: ____ Last Name: _____ Nickname: _____

Sex: ____ Date of Birth: _____ School in Sept. 10: _____ Grade in Sept. 10: _____

Address: _____ City: _____ State: ____ Zip Code: _____

Home Phone: _____ Family E-Mail Address: _____

FAMILY INFORMATION

Mother's Name: _____ Occupation/Place of Business: _____

Work Phone: _____ Cell Phone: _____ E-Mail: _____

Father's Name: _____ Occupation/Place of Business: _____

Work Phone: _____ Cell Phone: _____ E-Mail: _____

Parents are: Married: ____ *Separated: ____ *Divorced: ____ Widowed: ____

*Custodial parent is: Mother: ____ Father: ____ Grandparent(s): ____ Other: ____

EMERGENCY INFORMATION

The following people are authorized to pick up my child when I send word or cannot be reached to collect my child myself.

1. Emergency Contact (other than parents): _____

Relationship to child: _____ Work Phone please specify hours: _____ Cell _____

2. Emergency Contact (other than parents) _____

Relationship to child: _____ Work Phone please specify hours: _____ Cell: _____

Parent/Guardian Signature: _____ Date: _____

Allergies, Medications and Special Issues: _____

(We are not allowed to administer any medication including Tylenol without a written consent from your doctor).

I give authority to the Day Camp Staff to obtain necessary medical treatment for my child with the understanding that the family will be notified as soon as possible. I also give permission for photographs of my child to be used for publicity or promotion of JCC programs.

Parent/Guardian Signature: _____ Date: _____

REGISTRATION INFORMATION

Please check one:

Country Day Camp (Grades 1-6) _____ **Super Seniors** (Grades 7-8 optional 6) _____ **CIT** _____

T-Shirt Size: Youth Small (6-8) _____ Youth Medium (10-12) _____ Youth Large (14-16) _____
 Adult Small _____ Adult Medium _____ Adult Large _____ Adult XL _____

JCC Member: _____ **Member Expiration Date:** _____ **Non-Member:** _____

	34 days	19days	15 days	25 days	30 days
	Full Season 6/28 – 8/13	Session I 6/28– 7/23	Session II 7/26 – 8/13	5 Weeks	6 Weeks
MEMBER*:					
Grades 1-4	\$2,950	\$1,850	\$1,525	\$2,225	\$2,700
Grades 5-7	\$3,175	\$2,125	\$1,850	\$2,450	\$2,800
Super Seniors (Grades 7-8, optional 6)	\$3,395	\$2,250	\$2,100	\$2,900	\$3,225
Door to door transportation add	\$500	\$300	\$225	\$375	\$425
NON-MEMBER:					
Grades 1-4	\$3,175	\$2,025	\$1,700	\$2,425	\$2,800
Grades 5-7	\$3,375	\$2,250	\$2,050	\$2,650	\$3,000
Super Seniors (Grades 7-8, optional 6)	\$3,750	\$2,450	\$2,300	\$3,050	\$3,450
Door to door transportation add	\$525	\$325	\$275	\$400	\$450

* Member fee requires active JCC Family Membership (\$399) or Single Parent Membership (\$215) to be in effect through 8/10.

Deposit: \$500 with registration form. Deposit is not refundable after January 1, 2010.

Full Payment is due by June 1, 2010. (Scholarship requests must be submitted prior to April 1, 2010.)

Please fill out all of the following:

Attending for the full summer _____ for less than the full summer _____ to _____

Special grouping requests if any: _____
 (Please note, every effort will be made to honor your request. We may not be able to grant all requests.)

I would like transportation: Central pick up/drop off: _____ Door to Door (cross street): _____

ADDITIONAL INFORMATION OR NOTES you would like the staff to be aware of:

I authorize the JCC Country Day Camp to take my child on any outings and camp trips and to provide transportation for my child as indicated above and during camp outings and trips.

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

For office use only date received & R or T #: _____