



## Summer Camp at Temple Beth Ahm Yisrael

### June 25 – August 17, 2018 2018 Registration Form

Family Name \_\_\_\_\_ Child's Name \_\_\_\_\_  Male  Female Date of Birth \_\_\_/\_\_\_/\_\_\_

Mom's Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Home Address \_\_\_\_\_

Dad's Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Home Address \_\_\_\_\_

#### No Camp July 4

Please check the appropriate program and sessions:

Session 1 – June 25 – July 20

Session 2 – July 23 – August 17

Program	Days	Times	Session 1	✓	Session 2	✓	Both	✓
<b>Mommy &amp; Me</b>	Wednesday	9:15 – 10:15	\$60		\$60		\$120	
<b>Toddlers</b>	3 Days	9:00 – 12:30	\$462		\$504		\$962	
	3 Days	9:00 – 2:30	\$726		\$792		\$1515	
<b>2s</b>	Mon - Fri	9:00-12:30	\$798		\$840		\$1635	
	Mon - Fri	9:00-2:30	\$1254		\$1320		\$2570	
<b>3s/Pre K</b>	Mon - Fri	9:00-12:30	\$798		\$840		\$1635	
<b>3s/Pre K</b>	Mon - Fri	9:00 – 2:30	\$1254		\$1320		\$2570	

#### Full Time Hours Available

#### REGISTRATION AND REFUND POLICY

**Payment Schedule:** \$200 **non-refundable** deposit is due at registration. 50% of tuition is due by May 1, with the balance due by June 15, 2018.

**Member Discount:** Please call the Temple Office for more information.

**Family Discount:** You will receive a 5% discount for the second child registered.

**Cancellation Policy:** Refunds will not be issued after May 1. Cancellation must be in writing.

**Medical Forms:** If your child is not currently attending The Early Childhood Program, a medical form is required prior to the first day of camp.

**Payment Information**

Fee	\$ _____
Sibling Discount	\$ _____
Deposit Amount	\$ _____
Amount Due	\$ _____

Please charge my CC on file: \_\_\_\_\_ 50% on 5/1 and the balance on 6/15. \_\_\_\_\_

I will be sending in payments: \_\_\_\_\_ 50% on 5/1 and balance on 6/16.

**Please Note: Temple Beth Ahm Yisrael reserves the right to cancel any group due to lack of enrollment. We also reserve the right to add/change a child's placement based on enrollment.**

I have read and accept the above registration and refund policies

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date