



Summer 2024 Application

Child's Name: _____ Nickname: _____

Phone _____ Gender: M ___ F ___ Child's D.O.B. _____

Address: _____ Referred By: _____

Parent's Name _____ Occupation: _____

Email: _____ Cell Phone: _____

Business Phone: _____

Parent's Name: _____ Occupation: _____

Email: _____ Cell Phone: _____

Business Phone: _____

Caregiver / Babysitter: _____ Tel. No: _____

Emergency Contacts

List two people who can be responsible for your child in case of an emergency if parents or caregivers cannot be reached.

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Terms of Enrollment:

1. I understand the person who signs this contract is responsible for the total tuition and fees.
2. **I understand that a \$300 non-refundable deposit is due at time of application. If a check is not included, your credit card will be charged. An application is not considered complete until payment is made.**
3. I understand there is no credit for illness, holidays, vacations, early withdrawals, or closings due to weather or emergencies nor will makeup days be scheduled.
4. I will abide by the placement, teacher assignment, and the rules and regulations of Camp Little Feet.
5. I understand my child will be sent home in case of illness, and I will abide by Camp Little Feet's policies on being 24-hour fever and vomit free, without medication, before returning to camp.
6. I understand that Temple Beth Rishon's Camp Little Feet (hereafter know as Camp Little Feet) may arrange for outside services and activities, including Goldfish Swim School, which may involve some element of personal risk to my child. In consideration of permitting our child to enroll in Camp Little Feet and participate in these outside services and activities, on behalf of myself, my spouse, my child being enrolled under this application and/or other legal guardian (collectively, the "Releasors") that (i) Camp Little Feet shall not be held responsible, legally or financially for any harm, risk or liability that may arise in connection with any injury or harm caused to my child, including bodily injury or death; (ii) that on behalf of the Releasors I agree not to sue Camp Little Feet for the claims released and discharged under this enrollment form; and (iii) that I, on behalf of the Releasors release and forever discharge all claims or causes of action against Camp Little Feet, including any and all damages, direct or indirect, consequential, punitive or otherwise, as well as all attorneys' fees and expenses.

Parent's Signature _____ **Date** _____

Director's Signature _____ **Date** _____

2024 Full Day Schedule & Fees

Week 1: July 1, 2, 3 (No camp July 4 & 5) **Week 5:** July 29, 30, 31, Aug 1, 2
Week 2: July 8, 9, 10, 11, 12 **Week 6:** Aug. 5, 6, 7, 8, 9
Week 3: July 15, 16, 17, 18, 19 **Week 7:** Aug. 12, 13, 14, 15, 16
Week 4: July 22, 23, 24, 25, 26

Days	Times	4 Weeks	6 Weeks	7 Weeks
3 Days M,W,F (no swim)	9:00am- 2:00pm	\$1260	\$1890	\$2205
4 Days	9:00am- 2:00pm	\$1840	\$2760	\$3220
5 Days	9:00am- 2:00pm	\$2300	\$3450	\$4025

A security fee of \$30 per week per family will be added for all campers, regardless of temple membership.

Payment in full by May 1, 2024 will result in a \$50 discount.

Children must attend camp 4 days per week (including Tuesday and Thursday) and be three years-old and potty trained to qualify for our swim program.

Half-day programming for Twos / Young Threes are available on a separate application.

Credit card information *(is required of all families regardless of method of payment)*. Any accounts past due will be charged to the credit card on file. There is a 3% service fee on all credit card payments.

VISA_____MC_____AMEX_____Card #_____Exp._____CVC_____

My child will attend camp on the following days:

(Children who do not wish to swim can only attend Monday, Wednesday, and Friday.)

Monday_____ Tuesday_____ Wednesday_____ Thursday_____ Friday_____

My child will attend camp on the following weeks:

(There is no swim on week 1- Goldfish is closed for maintenance.)

1_____ 2_____ 3_____ 4_____ 5_____ 6_____ 7_____

Total Fees: _____