



Camp Little Feet at Temple Beth Rishon

585 Russell Avenue Wyckoff, NJ 07481 201-891-4466



Summer 2023 Application

Child's name _____ Nickname: _____

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

Address: _____ Referred By: _____

Parent's name: _____ Occupation: _____

Cell phone: _____

Email: _____ Business Phone: _____

Parent's name: _____ Occupation: _____

Cell phone: _____

Email: _____ Business Phone: _____

Caregiver/Babysitter: _____ Tel. No: _____

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

Name: _____ Name: _____

Tel. No: _____ Tel. No: _____

Relationship: _____ Relationship: _____

Terms of Enrollment:

1. The person who signs this contract is responsible for the total tuition and fees.
2. 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.
3. I will abide by the placement, teacher assignment, and the rules and regulations of Camp Little Feet.
4. 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. I agree to abide by all COVID policies in place.
5. I understand that 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.
6. A \$300 non-refundable deposit is due at time of application.

Parent's Signature _____ Date _____

Director's Signature _____ Date _____

2023 Full Day Schedule & Fees

Week 1: June 26, 27, 28, 29, 30

Week 5: July 24, 25, 26, 27, 28

Week 2: July 5, 6, 7 (No camp 7/3 & 4)

Week 6: July 31, Aug. 1, 2, 3, 4

Week 3: July 10, 11, 12, 13, 14

Week 7: Aug. 7, 8, 9, 10, 11

Week 4: July 17, 18, 19, 20, 21

Days	Times	4 Weeks	6 Weeks	7 Weeks
3 Days M,W,F (no swim)	9:00am- 2:00pm	\$1056	\$1586	\$1827
4 Days	9:00am- 2:00pm	\$1520	\$2280	\$2632
5 Days	9:00am- 2:00pm	\$1880	\$2820	\$3255

A security fee of \$20 per week per family will be added for all campers, regardless of temple membership.

Payment in full by May 1, 2023 will result in a \$50 discount.

Child 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.

****Half Day campers and Full Day campers will be grouped separately. ****

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

VISA ___ MC ___ AM EX ___ Card # _____ Exp. _____ CVC _____

My child will attend camp on the following days:

(Children who do not wish to swim should 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 2– Goldfish is closed for maintenance.)

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

Total Fees: _____