



JEWISH COMMUNITY CENTRE of Hamilton & Area

1030 Lower Lions Club Road, P.O. Box 81203, Ancaster, Ontario L9G 4X1

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The Jewish Community Centre is a beneficiary agency of Hamilton Jewish Federation and is a municipal capital facility of the City of Hamilton



Camp Kadimah Summer 2015

Camper First Name: _____ Camper Last Name: _____

Address: _____

Home phone number: _____

Camper Gender: *Male* _____ *Female* _____ Date of Birth: _____

Camper Age (as of Dec 31 '15): _____ Grade as of Sept '15: _____

Health Card Number &
Expiry Date: _____

Pool (Please check one of the following):

____ Does not know how to swim ____ Can swim with a lifejacket ____ Can swim without a lifejacket

Cabin Mate Requests (*cannot be guaranteed*): _____

Parent #1 Information

Name: _____
Work Phone: _____
Cell Phone: _____
Email: _____

Parent #2 Information

Name: _____
Work Phone: _____
Cell Phone: _____
Email: _____

Camper Name: _____

1. Does your child suffer from any medical illness/condition that you feel that we should be aware of? If so, please explain. (e.g., Allergies, Seizures, Diabetes, etc.). Attach a separate sheet if necessary.

Yes No If no, please explain:

4. Is your child on any scheduled medications? *Yes* *No* If yes, please list below:

Drug	Dose	Time
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Special Instructions

Drug _____	Dose _____	Time _____
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Special Instructions

If the Camp Director must administer medication during the camp day, the original container with prescribed instructions must accompany the medication.

5. Please check off medication that can be administered by Camp Director (if necessary):

_____ **Tempra/Tylenol for a fever** _____ **Gravol for nausea** _____ **Benadryl for rashes/stings**

6. Please list two additional emergency contacts (other than parents) and your child's doctor's information:

Name	Phone #	Relationship
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Name	Phone #	Relationship
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Doctor's Name	Phone #
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To the best of my knowledge this child is in good health and is physically able to participate in all camp activities, except as previously indicated.

I will notify Camp Kadimah if there is any change in the medical history of my child between the time of completing this information form and their arrival the first day of camp.

Parent's Signature: _____ Date: _____

PLEASE **CIRCLE** THE UNIT AND WEEK(S) YOU WOULD LIKE YOUR CHILD TO BE ENROLED IN.
FEES ARE GIVEN AS MEMBER (M) and NON MEMBER (NM)

K'tanim: 2 years and up entering nursery in Sept 2015 **Ketzinim:** entering grade 3 and 4 in September 2015
Tironim: entering JK and SK in September 2015 **Giborim:** entering grade 5 and 6 in September 2015
Samelim: entering grade 1 and 2 in September 2015 **Chaverim:** entering grade 7-9 in September 2015

<u>WEEK</u>	K'tanim 2yrs-nursery (to 12:30)		K'tanim 2 yrs - nursery (all day)		Tironim JK SK		Samelim Grade 1 & 2		Ketzinim Grade 3 & 4		Giborim Grade 5 & 6		Chaverim Grade 7-9	
	M	NM	M	NM	M	NM	M	NM	M	NM	M	NM	M	NM
1-10	110	140	155	185	155	185	155	185	155	185	155	185	125	155
11-17	110	140	155	185	145	175	155	185	155	185	155	185	125	155
18-24	110	140	155	185	155	185	155	185	155	185	155	185	125	155
25-31	110	140	155	185	145	175	155	185	155	185	155	185	125	155
1-7 Week	100	130	145	175	125	155	135	165	135	165	135	165	115	145
8-14	110	140	155	185	145	175	155	185	155	185	155	185	125	155
15-21	110	140	155	185	155	185	155	185	155	185	155	185	125	155
22-28	110	140	155	185	145	175	155	185	155	185	155	185	125	155

SPECIALS: Only one discount will apply

- Never been a **JCC Member**? Now's your time! Youth Social Membership \$55+hst
- **Early Bird Special:** register by May 15th and receive 10% off
- **Family Discount:** Families registering 3 or more children at once will receive 10% off
- **Full Summer Reward:** Week 5 is free when you register for all 8 weeks by May 29th, 2015
- **Referral Discount:** Refer a new family and receive a 10% discount (family must register by May 15, 2015)

Total Number of weeks registering for: _____

(Discounts are off the weekly camp fee) Total Session Fees: _____

****Please note this discount does not apply to the additional fees below****

- ☐ **Full Summer Reward**
- ☐ **Early Bird Special**
- ☐ **Family Discount**
- ☐ **Referral Discount**

****NOTE: Only one discount may apply****

Discount Total:

Total amount after discount:

Additional Fees

- ☐ **Camp George** (\$80) Yes — No (Not covered by bursaries)
- ☐ Extra shirts \$5 plus HST per shirt (shirts —x \$5.00 per shirt) _____

****1 shirt is provided for every 2 weeks registered****

- ☐ Pre care (\$4 per family) *8:00AM-8:45AM* _____

- ☐ After care (\$4 per family) *4:00PM-5:30PM Monday-Thursday* _____

Amount after discounts:

Additional Fees:
Total Amount Payable:

ALL Registration Forms must be submitted with a \$100 non-refundable deposit to hold your spot. Late Registration Fee of \$25 after the due date. Payment deadlines are non-negotiable.

CANCELLATION & REFUND POLICY

1. Cancellations prior to June 1st, 2015 will receive a full refund less a \$25 administration fee.
2. Cancellations to any and all registrations made on or after June 2nd, 2015 will receive a 50% refund if written cancellation is received a minimum of one full week prior to the session being cancelled.
3. Days missed for any reason will not be refunded. If a camper is absent due to illness for an entire session a 50% refund will be granted on the submission of a Doctor's note to the JCC Office.

ADMINISTRATIVE POLICY

All Campers **MUST** be registered by the Wednesday prior to the session they wish to attend. **NO** exceptions will be made. Due to our commitment to safety, our staff to child ratio must always be in effect and therefore we will not be able to guarantee spots.

***** Extended Care Policy*****

Camp Kadimah offers extended care supervision for campers **Monday - Thursday** at a cost of \$5/family for morning care & \$5/family for afternoon care. Morning care **BEGINS** at 8am and after cares **BEGINS** immediately at 4pm and **ENDS** at 5:30pm. An additional charge of \$1 per minute after 5:30pm will be levied for late pick ups. **PAYMENT** is due at the time of drop off and pick up at the JCC front desk.

1. Camp Kadimah's 2015 full season begins on Monday July 6th, 2015 and ends on Friday, August 28, 2015. **Please note that there will be no camp Monday August 3rd, 2015 for the Civic Holiday.**
2. An application and camper information form must be completed and submitted for each child, **prior to the commencement of session(s) of enrollment.**
3. Applications **WILL NOT** be processed unless accompanied by a non-refundable \$100 deposit, per child and a **signed application form.** All deposit payments **MUST** be dated the day of registration.
4. Cheques are payable to the Jewish Community Centre of Hamilton and Area. Payment can be made by EXACT Cash/VISA/MasterCard/Amex & Debit.

Campers WILL NOT be admitted to camp until the application and camper information forms are completed and the balance of fees is paid.

5. Cheque(s) that are returned with Non Sufficient Funds are subject to a \$25 service charge per cheque; cash or a certified cheque will be required within 10 days of notice or the camper's registration will be cancelled.
6. Camp Kadimah reserves the right to terminate the stay of any camper if, in the opinion of the Camp Director, it is in the best interest of the child or the camp. In such an event, it is understood that a proportionate (pro-rated) refund will be made.
7. The JCC/Camp Kadimah cannot be held responsible for the loss, damage or theft of any of the camper's belongings brought to camp. All personal belongings (including electronic games, walkmans etc.) must be left at home.
8. The JCC/Camp Kadimah cannot be held responsible for any and all claims for damages arising as a result of any accident, injury or otherwise sustained by the above named child arising from participation in any camp activities.
9. Parents agree to provide their children with daily dairy lunch, 2 drinks, snacks, sunscreen (SPF 30 or more), hat, and all prescription medications (including epi-pens) where necessary, as well as all relevant supplies that pertain to such medications (i.e. carrying pouch etc.) **Please note: all children carrying epi-pens will need to provide the Camp Director with a second epi-pen to be kept in the camp office for emergency use only.**
10. Parents agree to allow their child(ren) to participate in all camp activities, camp overnights (where applicable) and in any supervised activities not on camp property.
11. Withdrawal from any aspect of camp may be accommodated upon written request.
12. Parents agree to give the JCC and Camp Kadimah officials the authority to act on their behalf in case of emergency.
13. **Parents agree that photographs and/or videos of their child(ren) may be taken and used for camp promotional activities. Yes _____ No _____**

Registration Agreement

- I/We hereby apply for registration for the herein named child for the camping services indicated in this application.
- I/We have read the conditions of enrolment, cancellation & refund policy and the fee schedule as specified in this application and agree to abide by the conditions outlined.
- I/We have enclosed the \$100 deposit (per child) and post-dated cheque(s), Visa/Mastercard/Amex/Debit or payment in full for EACH child that I/We am/are registering. Payments are to be post-dated as follows:
 - July sessions: June 25th, 2015 August sessions: July 31st, 2015

Parent's or Guardian's Signature: _____ Date: _____

*****Office Use Only*****

Camper Name: _____

Is camper a JCC member? ____ Yes ____ No

☐ would like to purchase a Youth Membership ____ Yes ____ No ***additional fee applies must be paid separately***

Payment Information

(discounts are off the total) Total Session Fees: _____

Total number of weeks registering for _____

SPECIALS: Only one discount will apply and applies of the weekly camp rate and is not applied to any additional fees.

- **JCC Membership** Now's your time! Youth Social Membership \$55+hst

- **Early Bird Special:** register by May 15th and receive 10% off

- **Family Discount:** Families registering 3 or more children at once will receive 10% off

- **Full Summer Reward:** Week 5 is free when you register for all 8 weeks by May 29th, 2015

Overnight Trip ____ Yes ____ No (\$80.00)

☐ Extra shirts (\$5 plus hst per shirt) ____ # of extra shirts x \$5.00/shirt

1 shirt provided for every 2 weeks registered

Subtotal: _____

Overnight Fees: _____

Net Total: _____

Method of Current Payment: ____ Visa ____ M/C ____ Cheque ____ Debit ____ Amex ____ Cash

Amount of Current Payment: _____

Please note: All deposits must be dated on the day of registration

Method of Post Dated Payments: ____ Visa ____ M/C ____ Cheque ____ Amex

Credit Card # _____

Expiry Date _____

Amount: June 25th 2015 _____ July 21st, 2015 _____

Other _____