

Member #: _____

Camper Information

First Name _____ Last Name _____ Birthday ____/____/____

Gender F M _____ Grade in Fall 2016 _____ Zip _____

Parent/ Guardian Information

Name _____ Email* _____

Relationship _____ Phone 1 _____ Phone 2 _____

Name _____ Email* _____

Relationship _____ Phone 1 _____ Phone 2 _____

**Registration confirmations and other important information will be sent to this e-mail address*

DAY CAMP

	Week 1 6/12-6/16	Week 2 6/20-6/24	Week 3 6/26-6/30	Week 4 NO TUESDAY 7/3-7/7	Week 5 7/10-7/14	Week 6 7/17-7/21	Week 7 7/24-7/28	Week 8 7/31-8/4	TOTALS:
Arye									
East Bexley 5 day \$385	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$355 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Hoover 5 day \$405	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$375 <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

ADD ONS

	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Site	TOTALS:
Childcare Packages										
Before Care 7:00am-8:30am 5 days \$95/wk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	East <input type="checkbox"/>	
After Care 4:00pm -6:00pm 5 days \$115/wk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	East <input type="checkbox"/>	
Occasional Care \$10 per hour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	East <input type="checkbox"/>	Billed Every 2 Weeks
Transportation										
IF NEEDED *Round Trip *Included in weekly enrollment fees FREE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	East <input type="checkbox"/> North <input type="checkbox"/> New Albany <input type="checkbox"/>	
Lunch										
5-day Lunch \$25 (Chaverim and Arye)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	East <input type="checkbox"/>	

INFORMATION AND POLICIES

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Photography

I give permission for my child to be photographed, allow the JCC to use the photos for publicity purposes, and for my child's name to be included in the camp roster _____ (initial here)

If you wish to decline: I decline photo permission I decline inclusion in the roster

JCC Membership and Program Terms and Agreements

Center Membership: Registrants for JCC Programs must be members in good standing of the Jewish Community Center of Greater Columbus. Membership must be maintained for a minimum of 3 months. All prior financial obligations to the Jewish Community Center must be fulfilled before program registrations will be accepted.

Payment Types: The JCC business office accepts the following methods of payment for billed services:

- Cash/Check
- Direct Checking Debit (EFT)
- Visa/MasterCard/American Express/Discover

Deposits: Deposits are due at the time of registration for Summer Camp programs. \$100 deposit per camper is NON-REFUNDABLE after the date the initial registration is processed. For families applying for financial assistance, deposits are required as listed above. However, if you decide your financial award is insufficient, you may request a refund of your deposit. Please go to www.columbusjcc.org/summer-camps/ for more information on financial assistance.

Discounts: Discounts do not apply to Pre-Camp, lunches, childcare and Safari Camp. Members may qualify for a \$25 Sibling Discount on each additional child enrolled in camp. Discount does not apply to Pre-Camp or Post Camp.

Withdrawal Policy: Withdrawals should be submitted only in writing to Tasha Freeman at [tfcolumbusjcc.org](mailto:tf@tfcolumbusjcc.org)

- Withdrawals on or before **April 3, 2017**; full refund of payments to date **less \$100 deposit per child.**
- Withdrawals between **April 4 and June 1, 2017**; full refund of payments to date **less \$100 deposit per child less \$50 administrative fee.**
- No refund or withdrawals are given for vacation, other absences, unused camp days, or for weeks dropped after **June 1, 2017.**
- Refunds are processed after camp has concluded, unless a complete drop is requested prior to the start of camp. No refunds will be processed during camp.

Changing, Adding or Reducing Weeks: Additional weeks are welcome and processed with NO administrative fees, provided space is available. Payment for adding weeks is due at the time the change is requested after camp has started. Your credit card or EFT payment plan will be processed at that time.

Payment Schedule: Payments for Membership Dues, Early Childhood Tuition, Camp Fees, and other program fees are processed in the business office. Please allow 2 to 3 business days for your payment to be applied to your account. Payments received on or after the 25th of the month may not be reflected on your monthly statement.

Fees: A \$35 fee will be assessed to a member's account for each occurrence of a Returned Check, Returned Direct Checking Debit (EFT), or Returned Credit Card payment.

Delinquent Accounts: Accounts for which payment has not been received within thirty (30) days of service will be considered delinquent. The JCC will make initial attempts at collection via phone call or written request. We will allow reasonable response time to resolve the delinquent balance. If initial attempts do not resolve the balance, or we receive no response to repeated requests, we will send the delinquent account to collections. **Please be aware that delinquency may result in an interruption of service.**

I, as parent or legal guardian representing this minor, agree to release the Jewish Community Center Summer Camps, its officers, employees and volunteers from any and all liability for accidents, injuries, loss of and/or damage to my/our person or property that may arise out of my child's participation in or at the listed activity/activities. I/we are aware that participating in activities or using JCC facilities involves certain risk of injury despite safety precautions. I give permission for my child to take part in all camp activities, including trips away from camp. In the event of an accident or emergency, if my child's physician is not available, I grant permission to call another licensed physician. I authorize the camp to act on my behalf according to their best judgment. **I have read the JCC Membership & Program Terms & Agreements, JCC Summer Camp Parent Manual, and payment terms and accept full responsibility for 100% payment of all camp fees.**

Parent/Guardian Signature _____ **Date** _____