

Camper Information

## Camper Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Member #: \_\_\_\_\_

Gender F M NB (please Circle) Grade in Fall 2020 \_\_\_\_\_ Birthday \_\_\_\_/\_\_\_\_/\_\_\_\_

## Parent/ Guardian Information

Name: \_\_\_\_\_ Email\* \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Email \_\_\_\_\_ Phone: \_\_\_\_\_

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

Week	1	2	3	4	5	6	7	8	Site East, North, New Albany	Please select one:
<b>TRANSPORTATION</b> IF NEEDED <b>FREE</b>	<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"/>	One Way <input type="checkbox"/> Round Trip <input type="checkbox"/>

## PRE- CAMP

<b>Kick off Camp</b> NO LUNCH PROVIDED <i>East Location Only</i>	\$325 M-F <input type="checkbox"/> 6/1-6/5 8:00am-4:00pm	OR	<b>Sailing Camp</b> NO LUNCH PROVIDED <i>Offsite</i>	\$385 M-F <input type="checkbox"/> 6/1-6/5 8:00am-4:00pm
<b>Daily Kick off Camp</b> <i>East Location Only</i>	\$65 / day <input type="checkbox"/>	6/1-6/5 8:00am-4:00pm	M <input type="checkbox"/> W <input type="checkbox"/> F <input type="checkbox"/>	Tu <input type="checkbox"/> Th <input type="checkbox"/>
<b>After Care</b> \$65 / week or \$12 / hour 4:00-6:00 pm	\$65 M-F <input type="checkbox"/>	6/1-6/5 4:00pm-6:00pm	M <input type="checkbox"/> W <input type="checkbox"/> F <input type="checkbox"/>	Tu <input type="checkbox"/> Th <input type="checkbox"/>

## POST- CAMP

<b>Try Something New/ Safari Camp</b> NO LUNCH PROVIDED <i>East Location Only</i>	\$335 <b>Try Something New Week</b> 8/3-8/7 <input type="checkbox"/> 8:00am- 4:00pm 5 Day Only No Daily	<b>Try Something New Week Options (Choose One)</b> <input type="checkbox"/> STEM <input type="checkbox"/> Art <input type="checkbox"/> Dance <input type="checkbox"/> Challenge "Team Building"	\$335 <b>Safari Camp Week</b> 8/10-8/14 <input type="checkbox"/> 8:00am- 4:00pm	\$70 PER DAY <b>Safari Camp Week</b> M <input type="checkbox"/> W <input type="checkbox"/> F <input type="checkbox"/> Tu <input type="checkbox"/> Th <input type="checkbox"/>
<b>After Care</b> \$70 / week or \$12 / hour 4:00-6:00 pm	8/3-8/7 <input type="checkbox"/> 4:00pm-6:00pm	8/10-8/14 <input type="checkbox"/> 4:00pm-6:00pm	<b>Daily</b> \$12/ hour Occasional Care	

<b>HOOVER</b> 4 <sup>TH</sup> -6 <sup>TH</sup>	Week 1 6/8- 6/12	Week 2 6/15- 6/19	Week 3 6/22- 6/26	Week 4 NO Friday 6/29-7/3	Week 5 7/6- 7/10	Week 6 7/13- 7/17	Week 7 7/20- 7/24	Week 8 7/27- 7/31	M <input type="checkbox"/> W <input type="checkbox"/> F <input type="checkbox"/>	Tu <input type="checkbox"/> Th <input type="checkbox"/>
3 day \$290	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
5 day \$360	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$330	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

<b>HOOVER</b> Travel Camp 7 <sup>th</sup> & 8 <sup>th</sup> Grade	Week 1 6/8- 6/12	Week 2 6/15- 6/19	Week 3 6/22- 6/26	Week 4 NO Friday 6/29-7/3	Week 5 7/6- 7/10	Week 6 7/13- 7/17	Week 7 7/20- 7/24	Week 8 7/27- 7/31
7 <sup>th</sup> 5 day \$420 (only option)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$390	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8 <sup>th</sup> 5 day \$420 (only option)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> \$390	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### Before Care & After Care

Childcare Package	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Site:
<b>Before Care</b> 7am-8:30am									East <input type="checkbox"/>
3 day \$50/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"/>	Only option for aftercare
5 day \$70/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"/>	
<b>After Care</b> 4:00 -6:00pm									East <input type="checkbox"/>
3 day \$50/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"/>	Only option for aftercare
5 day \$70/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"/>	

<b>Specialty Camps</b>	Week 1 6/8- 6/12	Week 2 6/15- 6/19	Week 3 6/22- 6/26	Week 4 NO Friday 6/29-7/3	Week 5 7/6- 7/10	Week 6 7/13- 7/17	Week 7 7/20- 7/24	Week 8 7/27- 7/31
<b>Hoover</b> 4 <sup>th</sup> -8 <sup>th</sup>								
Theater: 4 <sup>th</sup> - 8 <sup>th</sup> Grade (full day camp) \$1,130								
Sailing Camp 4 <sup>th</sup> - 8 <sup>th</sup> Grade \$385							<input type="checkbox"/>	
Horseback 4 <sup>th</sup> - 8 <sup>th</sup> Grade \$385		<input type="checkbox"/>				<input type="checkbox"/>		
Visit Camp Livingston (4 days) 4 <sup>th</sup> grade and up \$350			<input type="checkbox"/>					
Visit Emma Kaufmann (2 days) 4 <sup>th</sup> grade and up \$265					<input type="checkbox"/>			
Visit Camp Wise Week (8 days) 4 <sup>th</sup> Grade and Up \$700							<input type="checkbox"/>	

# INFORMATION AND POLICIES

## 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 during enrollment in camp. Membership can be on a month to month basis. 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/](http://www.columbusjcc.org/summer-camps/) for more information on financial assistance. **\*\*If registering online – payment method used for the Deposit will be used for subsequent monthly payments unless a payment plan form is submitted indicating a different payment method. \*\***

**Discounts:** Discounts do not apply to Kick-Off Camp, CIT program, Lunches, Childcare, Overnight Camp Experiences or Safari Camp. Members may qualify for a \$25 Sibling Discount on each additional child enrolled in camp. **If registered before March 1<sup>st</sup> - \$100.00 discount for registering for 4 weeks or \$200.00 discount if registering for 8 weeks of camp.**

## Cancellation/Withdrawal and Refund Policy

- Cancellations and withdrawals must be requested in writing to Tasha Freeman at [tfreeman@columbusjcc.org](mailto:tfreeman@columbusjcc.org)
- Cancellations and withdrawals on or before **May 15, 2020:** full refund less \$100 deposit. Any drops after **May 15<sup>th</sup>** will result in forfeiture of any fees including lunches, aftercare or other associated fees.
- Unused camp days cannot be refunded or substituted with additional camp days. No refunds, other than according to the above schedule, are given for vacations, sick days or other absences from camp.
- Refunds are processed after camp is concluded, unless a complete drop is requested prior to the start of camp. No refunds will be processed during camp.

**I have read and understand the above Withdrawal and Refund Policy**

**Parent/ Guardian Initials**

**Changing or Adding Weeks:** Additional weeks are welcome, provided space is available. We will do our best to accommodate your requests after camp has started, but it is determined by space. Payment for adding weeks is due at the time the change is requested after camp has started. There is a change fee for a reduction in the number of days per week attending. Your credit card or EFT payment plan will be processed at that time. If choosing a 3 day a week option, days attending camp must be finalized by April 19<sup>th</sup>, 2020. After April, 19<sup>th</sup>, 2020 switching of initially registered days may or may not be accommodated based on if space is available.

**Payment Schedule:** Payments for Membership Dues and 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 25<sup>th</sup> 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 of Greater Columbus, 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 Payment Terms and accept full responsibility for 100% payment of all camp fees. By registering online, I understand that signing my name and dating is agreeing to the above terms.**

**Parent/Guardian Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

# 2020 Summer Camp Payment Worksheet

(One copy of this form MUST be completed per family)

Parent's Name: \_\_\_\_\_ JCC Account # \_\_\_\_\_

## DEPOSIT(S) Due at time of registration

Enclosed is a \$100 NON-REFUNDABLE deposit, required per child, which will be applied to your child's camp fees.

Total # of Children Registered \_\_\_\_\_ X \$100 = \$ \_\_\_\_\_ Received by \_\_\_\_\_

Cash \_\_\_\_\_ Check # \_\_\_\_\_

Visa/MC/Amex/Discover# \_\_\_\_\_ Exp. Date \_\_\_\_\_

CC Billing Name: \_\_\_\_\_ V-Code \_\_\_\_\_

CC Billing Address: \_\_\_\_\_

\_\_\_\_\_

## PAYMENT OPTIONS Due at time of registration (attach VOID check for EFT option)

### Payment in Full (choose one)

Cash (enclosed) \$ \_\_\_\_\_

Check # \_\_\_\_\_ (enclosed) \$ \_\_\_\_\_

Visa/MC/Amex/Disc \$ \_\_\_\_\_

(to be charged 4/15/20)

Acct # \_\_\_\_\_

Exp. Date \_\_\_\_\_ V Code \_\_\_\_\_

Billing Name \_\_\_\_\_

Billing Address \_\_\_\_\_

EFT (to be charged 4/15/20) \$ \_\_\_\_\_

Bank Name \_\_\_\_\_

Bank Route # \_\_\_\_\_

Bank Acct # \_\_\_\_\_

Name on Account \_\_\_\_\_

### Installment Payments (choose one)

**(6 monthly payments processed January thru June 2020) \***

\*Available for registrations received during the January Early Registration period

\*Registrations received after January Early Registration will require a 3-month payment plan processed April, May & June.

Process Dates:

Jan 20<sup>th</sup>, Feb 15<sup>th</sup>, March 15<sup>th</sup>, April 15<sup>th</sup>, May 15<sup>th</sup> & June 15<sup>th</sup>

Total Fees \$ \_\_\_\_\_

Divide by # months = payment \$ \_\_\_\_\_

Visa/MC/Amex/Disc

Acct# \_\_\_\_\_

Exp. Date \_\_\_\_\_ V Code \_\_\_\_\_

Billing Name \_\_\_\_\_

Billing Address \_\_\_\_\_

EFT Bank Name \_\_\_\_\_

Bank Route # \_\_\_\_\_

### APPLYING FOR FINANCIAL ASSISTANCE

NO

YES

If YES, you must still choose one of the options above. **Deadline April 19, 2020.**

#### Cancellation/Withdrawal and Refund Policy

- Cancellations and withdrawals must be requested in writing to Tasha Freeman at [tfreeman@columbusicc.org](mailto:tfreeman@columbusicc.org)
- Cancellations and withdrawals on or before **May 15, 2020**: full refund less \$100 deposit. Any drops after **May 15<sup>th</sup>** will result in forfeiture of any fees including lunches, aftercare or other associated fees.
- Refer to your Camp's Information & Policies page for full details.

I have read the JCC Membership & Program Terms & Agreements, authorize the JCC to process all charges agreed to on the 2020 Summer Camp Enrollment Form, and accept full responsibility for 100% payment of all camp fees.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_