

JCYS CAMP HENRY HORNER - Camp Registration 2011

26710 W. Nippersink Rd. • Ingleside, IL • 60041 • Phone 847-740-5010 • Fax 847-740-5014

Camper Information

(Please Complete One Form per Child)

Camper's Name _____ School _____ Grade (fall 2011) _____
 Gender M F Birth Date ___/___/___ T-shirt (Check one) Youth M L Adult S M L XL
 Friendship Request (*limit two*) _____ Years at Camp _____

Family Information

Parent/Guardian #1 _____ Email Address _____
 Address _____ City _____ State _____ Zip _____
 Home Phone (____) _____ Work Phone(____) _____ Cell(____) _____
 Parent/Guardian #2 _____ Email Address _____
 Address _____ City _____ State _____ Zip _____
 Home Phone (____) _____ Work Phone(____) _____ Cell(____) _____

Emergency Information

Emergency Contact _____ Relationship _____
 Home Phone (____) _____ Work Phone(____) _____ Cell(____) _____

Day Camp Fees

Includes bussing from designated pickup points NOT Door-to-Door

8 Weeks

Sessions 1 - 4

3day \$1650 (k-2 only)

K-2 \$2470

3-4 \$2620

5-8 \$2920

CIT \$755

6 Weeks

Please check 3

Session 1 Session 3

Session 2 Session 4

3day \$1355 (k-2 only)

K-2 \$2030

3-4 \$2155

5-8 \$2400

CIT \$565

4 Weeks

Please check two

Session 1 Session 3

Session 2 Session 4

3day \$955 (k-2 only)

K-2 \$1475

3-4 \$1565

5-8 \$1745

CIT \$380

2 Weeks

Please check one

Session 1 Session 3

Session 2 Session 4

3day \$490 (k-2 only)

K-2 \$760

3-4 \$815

5-8 \$905

Day Camp

Hot Lunch

| | 8 weeks | 6 weeks | 4 weeks | 2 weeks |
|------------------|--------------------------------|--------------------------------|--------------------------------|-------------------------------|
| 5 days | <input type="checkbox"/> \$224 | <input type="checkbox"/> \$168 | <input type="checkbox"/> \$112 | <input type="checkbox"/> \$56 |
| 3 day (k/2 only) | <input type="checkbox"/> \$112 | <input type="checkbox"/> \$84 | <input type="checkbox"/> \$56 | <input type="checkbox"/> \$28 |

Day Camp

Extended Care

| | 8 weeks | 6 weeks | 4 weeks | 2 weeks |
|-----------------------|--------------------------------|--------------------------------|--------------------------------|--------------------------------|
| Before Camp Care | <input type="checkbox"/> \$160 | <input type="checkbox"/> \$120 | <input type="checkbox"/> \$80 | <input type="checkbox"/> \$40 |
| 5 Day After Camp Care | <input type="checkbox"/> \$640 | <input type="checkbox"/> \$480 | <input type="checkbox"/> \$320 | <input type="checkbox"/> \$160 |
| 3 Day After Camp Care | <input type="checkbox"/> \$384 | <input type="checkbox"/> \$288 | <input type="checkbox"/> \$192 | <input type="checkbox"/> \$96 |

Door-to-Door Transportation*

\$200 per session \$120 per session
 3day campers

| | | |
|-------------|-------------------------------|--------------------------------|
| AM Pick-up | <input type="checkbox"/> Home | <input type="checkbox"/> Other |
| PM Drop-off | <input type="checkbox"/> Home | <input type="checkbox"/> Other |

Register by 12/31/10

Save 15%
off the regular rate

By 2/28/11
save 5%

Overnight Camp Fees*

*Canteen & trip fees included

Regular Rate

6 weeks

\$5300

4 weeks

Sessions 1 2 3 please check

\$3695

2 weeks

Sessions 1 2 3 please check

\$1925

1st Timers week

3rd-5th only

\$875

Additional Programs

Overnight Camp

Intersession

\$150 per weekend

Post Camp

8/15-19/11

Intersession 1 7/15-17

Intersession 2 7/29-31

5 Days \$275

\$65/day M T W Th F

circle days needed

Session Dates

Day Camp

■ Session 1 6/20-7/1

■ Session 3 7/18-29

■ Post Camp 8/15-19

■ Session 2 7/5-15

■ Session 4 8/1-12

Overnight Camp

■ 1st Timers 6/26-7/1

■ Session 2 7/17-29

■ Session 1 7/3-15

■ Session 3 7/31-8/12

CHH Day Camp provides transportation from designated pickup points in or near your neighborhood.

**Door-to-Door* Transportation is available from the following towns: Antioch, Buffalo Grove, Vernon Hills, Mundelein, Gurnee, Grayslake, Wheeling (north of Hintz Road), Arlington Heights (north of Dundee), Long Grove, Lake Villa, Lake Zurich, Lindenhurst, Round Lake, and Spring Grove. Transportation to and from other towns may be available – please contact the office. Overnight transportation is provided from JCYS Northwest Family Center.

Payment Information

\$300 non-refundable deposit due with registration. No application will be accepted without a deposit.

- Option 1- \$300 deposit enclosed, balance due 5/15/11
- Option 2 - Credit Card deposit + auto pay on 15th of each month until 5/15/11. Payments evenly divided from date of registration until 5/15/11
- Option 3- Payment in full (only option after 5/15/11)

Check # _____ Amount \$ _____

Credit Card (Visa or MasterCard) # _____ Expiration Date ___/___/___ Signature _____

I am interested in financial assistance –*applications for financial assistance cannot be accepted after 3/1/11. Please call with questions.*

To Register for Camp Henry Horner:

Fill out one Registration for each camper. Return forms with your payment. Registration will be processed on a first come, first served basis. When specific age groups fill, a waiting list will be maintained for that session until enough campers register to form another group.

All payments must be made in full by May 15, 2011 or paid in full if registering after this date.

- Receive a \$40 referral fee for new families that attend Camp Henry Horner. This will be refunded after the camp season.
- Option 1, 2, or 3 under payment information must be checked.
- There will be a \$35.00 fee for returned checks.
- Discount for 2nd child \$100. 3rd child or more \$250 each.

POLICIES

- Cancellation: Deposits are non-refundable. After May 15, 2011, payments beyond the deposits are non-refundable.
- Transfers: Deposits are transferable between session and siblings at any time if space permits. A \$50.00 processing fee applies if length of stay is shortened.
- Absences: There are **NO refunds** or make up days for absences due to illness, homesickness, vacation or other reasons including non-attendance of field trips and overnights or overnight in the intersession. If the unit program is a field trip and campers choose not to attend; there is no alternative program. There is no alternative program for Earth Trekker camping trips.
- Session Extensions: Extensions are based on availability. Payment must be made before the extension.
- Discounts: Discounts do not apply to session extension made after the start of camp.
- Participation: In the event that JCYS determines that continued participation in camp program is not appropriate, JCYS reserves the right to discontinue service. Any unused portion of camp fees will be refunded. There are no refunds for short-term suspensions (up to 4 total camp days), caused by inappropriate behavior.
- Medicals: Medical forms **must** be completely filled out and signed by a physician for children to attend camp.

Parent/Guardian Consent

1. I request that the participant named above be admitted to the Jewish Council for Youth Services Camp Program.
2. I understand that the deposit must accompany this form and that it is non-refundable unless my child is not accepted into the program or is unable to attend due to illness verified in writing by a physician. I further understand that the parent/guardian registering the above named child I, alone, am responsible for the fees as outlined on the front of this form. I further understand that if I withdraw my child from the program that I am responsible for the remaining balance of the fees.
3. I understand that fees may be subject to change given 30 days notice.
4. I understand that a medical form must be filled out, signed by the doctor and parent and returned before the first day of camp.
5. I understand that the program participants may be asked to have a personal interview with the Camp Directors or designee.
6. I have read and agree to abide the camp policies as written in the camp brochure and on this registration.
7. I give permission for the above named participant to go on out-of-facility field trips and to be included in camp photos and videos for publicity purposes in a variety of media, including but not limited to, brochures, advertisements and the JCYS and Camp Henry Horner websites.
8. I understand that the Jewish Council for Youth Services shall not be responsible for loss of personal property or personal injury sustained by the participant and I hereby agree to indemnify and hold harmless Jewish Council for Youth Services from such losses or injury.
9. In the event I cannot be reached in an emergency involving the above named participant, I hereby give permission to the appropriate medical personnel, selected by the Camp Director, to provide medical treatment deemed necessary by such medical personnel, including, but not limited to x-rays, tests, injection, blood transfusions, hospitalizations, anesthesia and surgery.
10. I give my permission for the name, address, and phone number of the above named participant to be shared with the other campers in his/her cabin group.

I acknowledge that all information I have provided is true and correct and that I have read and understand the Parent/ Guardian Consent.

Parent/Guardian Signature _____ Date _____