



THIS YEAR SAME CAMP TUITION RATES AS LAST SUMMER

OUR 13TH SEASON "7 Week Program"

www.CampGanIsraelSouthampton.com

Southampton

2019 Enrollment Application

B"H

The 2019 Camp Season Runs from Tuesday, July 2 - Thursday August 15 No Camp on Thursday, July 4

Child's Name, What Name Does Your Child Respond To, Home Address, Home Phone #, Hampton's Phone #, Hamptons Full Address & Zip

Gender, Date of Birth, Age, Grade entering September 2019, School, Mom's Name, Mom's Work #, Mom's Cell #, Mom's Email

(even if you do not receive mail there)

Dad's Name, Dad's Work #, Dad's Cell #, Dad's Email

Does your child receive any special services?, (Speech/OT etc)

Is there any information regarding your child that you feel our Camp should be aware of ?

In one line how would you best describe your child?

Yes, I want my child enrolled in CGI Theater Camp. (7-14 year olds) 7/29 - 8/15 - (Theater Camp takes place 3 afternoons a week for 2 hours per day. No extra fee applies)

\*PLEASE ENROLL MY CHILD FOR THE 2019 SEASON IN THE PROGRAM SELECTED BELOW:

Partial Scholarships Available Upon Request and Need

Camp Health Forms are due in by May 1, 2019.

(No child will be admitted without a completed health form.) (available on our website)

PAY FOR CAMP IN FULL BY MARCH 20, 2019 AND RECEIVE \$100 OFF PER WEEK.

Sibling Discount 5% off for Second Sibling

Full Time Licensed Security Guard-Retired Suffolk County Police Officer

Table with columns: WEEK, DATES, MINI GAN, MAIN DIVISION, C.I.T.'S. Rows include WEEK 1-7 and FULL SUMMER\*\*.

- Receive 5% OFF when you register 3+ weeks, Receive 10% OFF when you register for the full summer!, Extended day for Mini Gan +\$100 per week (not available for 2s), 2 year olds are required to be registered for at least 2 consecutive weeks, \*Full Summer Price above reflects 10% discount

PAYMENT METHOD (Tuition fully refundable until May 1, 2019, less \$250 for administrative fee)

- Visa, Mastercard, AMEX, Check Enclosed

Card Number, Expiration Date, CVC (3 or 4 digit code), Payment Amount

Cardholder's Name, Billing Address, City, State, Zip, Cardholder's Signature

PLEASE SIGN HERE AND ON REVERSE SIDE

If you are paying by check please make check payable to: Chabad Of Southampton Jewish Center

There are no refunds for absences, changes, withdrawal or terminations. Registration Camp Tuition is fully refundable until May 1, 2019, less a \$250 Administrative Fee.

CAMP GAN ISRAEL SOUTHAMPTON IS A PROJECT OF CHABAD OF SOUTHAMPTON JEWISH CENTER

Register Online via our Camp Website: CampGanIsraelSouthampton.com

- Turn Over Please -

\*To Register for a full or half camp session. 2 Tickets are required to be purchased to our Annual Chabad Dinner - (that will take place in late August 2019) - (\$360 per Ticket for a Total of \$720) made out to Chabad of Southampton Jewish Center

## DOOR TO DOOR BUS TRANSPORTATION (not included in tuition cost)

WE WILL BE PROVIDING 4 DIFFERENT BUS ROUTES FROM WESTHAMPTON, EASTHAMPTON, SOUTHAMPTON VILLAGE AND PARTS OF THE NORTH FORK DOOR TO DOOR CAMP BUS TRANSPORTATION IS ONLY AVAILABLE FOR CAMPER THAT ARE REGISTERED FOR AT LEAST 2 WEEKS OR MORE

- No, I will not be taking advantage of CGI's bus transportation - I will be dropping off and picking up my camper daily.
- Yes, my camper will be taking advantage of CGI's bus transportation.  
Round trip door to door transportation \$195 per week (or for 2 children a total of \$275 per week)

\*Please note: Camp Transportation on the way home leaves Camp at 3:30 pm on Monday thru Thursday and at 1:00 pm on Friday. Including For Mini Gan Campers.

Transportation Summer Address \_\_\_\_\_

## TERMS OF AGREEMENT

1. Tuition includes all camp activities, trips, a t-shirt, daily lunch & a daily snack. (excludes Wednesdays - Sandwich Day)
2. Full Camp Tuition Payment is Due Upon Registration. In addition donation payment of \$720 towards Annual Chabad Dinner 2019 must be paid prior to camp start date of July 2.
- 2A. Pay for camp in full by March 20, 2019 and receive \$100 off per week (offer Not including CIT Division)
3. Due to the seasonal nature of summer camping and the set limitation of spaces offered, no refund shall be provided for absences, changes, withdrawals, or dismissal for cause. The camp is not responsible for lost/damages clothing or belongings.
4. For the safety and general welfare of all campers, the Camp reserves the unrestricted right to dismiss a camper whose conduct or influence in the opinion of the director is detrimental to the best interests of the camp.
5. Permission is hereby granted for photographs to be taken of the camper and the Camp has the right to utilize these photographs in camp brochures, on our website and on all camp ads placed in Print and Online Advertising.
6. Permission is hereby granted to the Camp to take the child on trips outside camp as part of the regular camp program.
7. This contract constitutes the full understanding of the parties hereto and no change, modification or waiver of any of the terms shall be effective unless in writing and signed by both parties.

## MEDICAL PERMISSION STATEMENT

(must be completed before your child can be admitted to camp)

I hereby give Camp Gan Israel Southampton permission to take my child to any hospital facility or outside doctor when deemed necessary. Furthermore, I hereby give permission to such hospital or outside doctor to authorize x-rays and emergency treatment if deemed necessary. I understand that all medical bills for service rendered are my responsibility.

I have read the Terms Of Agreement and the Medical Permission Statement above and understand its terms and accept its conditions. In the event that this Agreement is executed by one parent, I acknowledge that I am also acting as the agent of the other parent with authority to so enroll my child at Camp Gan Israel Southampton and to execute this agreement on his or her behalf. I recognize that the Camp relies upon the representation herein made in accepting this enrollment.

I have read the Enrollment Agreement, and understand its terms and accept its conditions.

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Director's Signature \_\_\_\_\_ Date \_\_\_\_\_



SOUTHAMPTON

The Only Jewish Day Camp In The Hamptons

To register, complete this entire registration form and send it in with payment to our  
Camp Mailing Address: c/o Chabad of Southampton  
214 Hill Street · Southampton, NY 11968  
p: 631-680-6140 · f: 631-287-9395 · cgisouthampton@gmail.com

Register online via our camp website:  
[www.campganisraelsouthampton.com](http://www.campganisraelsouthampton.com)