

VACATION CAMP PROGRAM

The Mandel JCC's School's Out **Vacation Camp** For Kids in Grades K-6

Friday, March 2, 2012 • 10 am - 3 pm • The Mandel JCC

Are you counting the days until camp begins? Well the count is over! Join us when school is closed. We'll spend the day at the "J" making art projects, playing games and sports, and enjoying cooking, swimming and much more!

Please remember to send your child with a swimsuit, towel, sneakers, and a lunch! (*minimum 5 participants required*)

Mandel JCC Member: \$40; Non-Member: \$60
Extended care available from 7:30 am-6 pm

Supervised activities include crafts, swimming, gym time, games, inside/outside play, movies, & more. "G" & "PG" rated movies are chosen with discretion. All early morning extended day registrations must sign up & pay for late morning extended care as well.



For information or to register contact Hayley at (216) 593-6222 or hryshen@mandeljcc.org.

Vacation Camp Registration Form

Child's Name _____

Grade _____ JCC Member Yes No

Street Address _____

Zip Code _____ Home Phone _____

Parent (1) Name _____

Email _____ Birthdate _____

Day time Phone _____ Cell Phone _____

Parent (2) Name _____

Email _____ Birthdate _____

Day time Phone _____ Cell Phone _____

Emergency name (*other than parent*) _____

Phone _____

By Mail: Return registration form and payment to: Hayley Ryshen,
Mandel JCC 26001 S. Woodland Road, Beachwood OH 44122

By Phone: Registration must be confirmed by credit card.
Please call Hayley Ryshen at (216) 593-6222

Date	Time	Member	Non Member
<input type="checkbox"/> Fri., March 2	10 am-3 pm	\$40	\$60
<input type="checkbox"/> Early AM Care	7:30-9 am	\$6	\$9
<input type="checkbox"/> Late AM Care	9-10 am	\$4	\$6
<input type="checkbox"/> PM Care*	3-6 pm	\$12	\$18

* No charge for PM Care for Schools Out participants



26001 S. Woodland Road, Beachwood, OH 44122
(216) 831-0700 • www.mandeljcc.org

Payment: Amount Enclosed: \$ _____

Check (*make payable to The Mandel JCC*)

Master Card Visa Discover American Express
Credit Card # _____

Expiration Date _____

Name of Card Holder _____

Signature of Card Holder _____