

**THE MANDEL JEWISH COMMUNITY CENTER DAY CAMPS**  
**26001 S. Woodland Road, Beachwood, OH 44122**

Camp office use only:			
<input type="checkbox"/> PDC	<input type="checkbox"/> ADC	<input type="checkbox"/> PAC	<input type="checkbox"/> SKC
EF _____	Schlr _____		
Updated _____	Conf. Sent _____		
SN _____	Mem # _____		

# Registration Form 2010

## CAMPER INFORMATION

Camper's First Name		Last Name		<input type="checkbox"/> Male <input type="checkbox"/> Female		Birthdate	
Address				City		State	Zip
Home Phone		Email for all Camp Communication		<b>Campers will receive a camp t-shirt. Please circle size:</b> Children's S M L Adult's S M L XL			
Camper's Age (as of 9/30/10):		Camper's Grade Fall 2010:		Synagogue			
Is there one friend with whom your child would like to be grouped?		School currently attending		School attending Fall 2010			

## PARENT INFORMATION

Family Status <input type="checkbox"/> married <input type="checkbox"/> separated <input type="checkbox"/> single <input type="checkbox"/> divorced <input type="checkbox"/> widowed		Parent with Custody <input type="checkbox"/> both <input type="checkbox"/> mother <input type="checkbox"/> other <input type="checkbox"/> father				
Parent's Full Name		Home Phone	Business Phone	Email Address		
Parent's Birthdate (for ID purposes)	Cell Phone	Address (if different than camper)		City	State	Zip
Parent's Full Name		Home Phone	Business Phone	Email Address		
Parent's Birthdate (for ID purposes)	Cell Phone	Address (if different than camper)		City	State	Zip

## EMERGENCY CONTACT INFORMATION

Emergency Contact Name		Relation to Camper		Phone		Cell Phone	
Primary Care Physician				Phone			

## MANDEL JCC CAMPS ARE INCLUSIVE!

Please call me to arrange an intake meeting about enrolling my child with physical, emotional or developmental challenges. <input type="checkbox"/> Yes <input type="checkbox"/> No		My child is currently receiving special education services, therapies and/or other support services. <input type="checkbox"/> Yes <input type="checkbox"/> No	
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## CARPOOL

I am interested in carpooling.  
Please contact me if others in my area are interested.

**REGISTRATION FORM CONTINUES** 



**Can't decide between Anisfield or Playmakers? You can do both! Start your summer at Anisfield for 4 weeks and end with Playmakers Session Two.**

**Playland Kindergarteners can continue the summer with Anisfield A la Carte.**



**We offer a full summer of camp activities. 10 weeks of camp can begin and end with Summer Kids Center.**

**Questions? Contact the Day Camp Registrar at 216-831-0700, ext. 1349. DayCamps@mandeljcc.org**

## CAMPER'S NAME \_\_\_\_\_

### Anisfield Day Camp (Grades 1-6)

- 8 weeks\*
- 6 weeks
- 4 weeks
- Horseback Riding Option

### Anisfield's Maccabi Sports Camp (Grades 2-6)

- 6 weeks
- 4 weeks

### Anisfield's A la Carte

- A la Carte Week #7\*
- A la Carte Week #8\*

\* included in 8 week fee

Date	Member	Non Member	Fee
June 21 – August 13	\$ 1,805	\$ 2,645	_____
June 21 – July 30	\$ 1,355	\$ 1,985	_____
June 21 – July 16	\$ 905	\$ 1,325	_____
2 week session	\$ 200	\$ 300	_____
June 21 – July 30	\$ 1,355	\$ 1,985	_____
June 21 – July 16	\$ 905	\$ 1,325	_____
August 2-6	\$ 265	\$ 370	_____
August 9-13	\$ 265	\$ 370	_____

**\* If enrolling in A la Carte weeks 7 and/or 8 please indicate specific program below:**

**Week 7 (Aug 2-6)** Choose One:  Aleph: Gr K-2  Bet: Basketball, Gr 2-6  Gimmel: Burton Camp, Gr 2-6

**Week 8 (Aug 9-13)** Choose One:  Aleph: Gr K-2  Bet: Golf & Tennis, Gr 2-6  Gimmel: Burton Camp, Gr 2-6

### Anisfield's Weekly Option

- Enroll my camper in a non-traditional session (i.e. not attending one of the specific session dates listed above). The cost per week is \$265 Member, \$370 Non Member. Please write in requested dates below. Please have registrar contact me about pricing.

Playland (4 years by Sept 30, 2010)	Date	Member	Non Member	Fee
<input type="checkbox"/> 6 weeks	June 21 – July 30	\$ 1,150	\$ 1,775	_____
<input type="checkbox"/> Playland AM Care		\$ 285	\$ 425	_____
<input type="checkbox"/> Playland 2-4 pm Care		\$ 375	\$ 565	_____
<input type="checkbox"/> Playland 2-6 pm Care		\$ 750	\$ 1,135	_____
Playland Kindergarten	Date	Member	Non Member	Fee
<input type="checkbox"/> 6 weeks	June 21 – July 30	\$ 1,150	\$ 1,775	_____
<input type="checkbox"/> Playland AM Care		\$ 285	\$ 425	_____
<input type="checkbox"/> Playland 2-4 PM Care		\$ 375	\$ 565	_____
<input type="checkbox"/> Playland 2-6 PM Care		\$ 750	\$ 1,135	_____
<input type="checkbox"/> Anisfield A la Carte Camp week #7	August 2-6	\$ 265	\$ 370	_____
<input type="checkbox"/> Anisfield A la Carte Camp week #8	August 9-13	\$ 265	\$ 370	_____
<input type="checkbox"/> AM Care for A la Carte weeks	AM/week #wks_____	\$40/wk	\$60/wk	_____
<input type="checkbox"/> PM Care for A la Carte weeks	PM/week #wks_____	\$50/wk	\$75/wk	_____

Playmakers Performing Arts Camp	Date	Member	Non Member	Fee
<b>Playmakers Grades K-9</b>				
<input type="checkbox"/> Session 1: Grades K-9	June 21 – July 16	\$ 670	\$ 1,070	_____
<input type="checkbox"/> Session 2: Grades K-9	July 19 – August 13	\$ 670	\$ 1,070	_____

Summer Kids Center (K-6)	Date	Member	Non Member	Fee
<input type="checkbox"/> Pre Camp Session 1	June 14-18	\$ 270	\$ 370	_____
<input type="checkbox"/> Post Camp Session 2	August 16-20	\$ 270	\$ 370	_____

Extended Care (Anisfield, Playmakers & Summer Kids Center)	Date	Member	Non Member	Fee
<input type="checkbox"/> AM Care weekly fee	6/14-8/20 #wks_____	\$ 40/wk	\$ 60/wk	_____
<input type="checkbox"/> PM Care weekly fee	6/14-8/20 #wks_____	\$ 50/wk	\$ 75/wk	_____

Shuttle Services (June 21-August 13 only)	Member	Non Member	Fee
<input type="checkbox"/> Drop off/Pick up at Mandel JCC to & from Performing Arts Camp	Free	Free	Free

# PAYMENT INFORMATION

Camper's Name \_\_\_\_\_

**A NON-REFUNDABLE \$150 DEPOSIT AND ARRANGEMENTS TO PAY THE BALANCE MUST BE INCLUDED WITH YOUR REGISTRATION.**

**Payment options:**

- Check enclosed for full amount.
- Check enclosed for \$150 deposit and a VOIDED check for 3 automatic withdrawals on **February 15, March 15, and April 15.**
- Charge my credit card for the full amount of camp today. \*3% discount.
- Charge my credit card \$150 deposit today, then 3 payments on **February 15, March 15, and April 15.**

**Credit card payment:**  VISA  MasterCard  AmerEx  Discover

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Card number \_\_\_\_\_ Exp. month \_\_\_\_\_ year \_\_\_\_\_

Name on card \_\_\_\_\_

Signature \_\_\_\_\_

**SPONSOR A CAMPER**

Please add the following tax-deductible gift to my fees to help send a child to The Mandel JCC Day Camps

- \$18       \$144
- \$54       \$ \_\_\_\_\_

**Total amount due:**

Camp Fees	\$ _____
Extended Day Fees	\$ _____
Shuttle Fees	\$ _____
Subtotal	\$ _____
3% discount (if applicable*)	-\$ _____
<b>Total</b>	<b>\$ _____</b>

**FINANCIAL ASSISTANCE**

I would like to receive a confidential application for financial assistance. I am enclosing a \$100 deposit to hold my camper's space.

Applications for financial assistance must be submitted by **February 15** and are granted on a need and first come, first served basis.

Please send me a receipt for dependent care reimbursement (mailed September 2010)

*\* Receive 3% discount with payment in full at time of registration. Offer valid until March 1, 2010 ONLY.*

## THE MANDEL JCC DAY CAMP POLICIES

**For Camper's safety, medical consent forms must be received by camp office prior to first day of camp. Camp will provide forms upon registration.**

- A.** In the event of emergency, I authorize the Camp Director or the Camp Medical Staff to act for me according to their best judgement. I understand that payment for medical services is solely the family's responsibility.
- B.** I understand that camp fees are NON-REFUNDABLE AND NON-TRANSFERABLE.
- C.** I understand that there is a \$25 administrative fee for any changes made after April 15, 2010.
- D.** Camper's photo and quotes may be used for publicity purposes.
- E.** If child does not complete the session at Camp's suggestion, a refund will be made for session's unexpired days. If a child is withdrawn from Camp by the parents, prior to session's end, no refund will be made.
- F.** I agree to allow The Mandel JCC to release my child's name, address and phone number to other campers as part of a camp roster.
- G.** Registrations will only be processed with full payment or deposit and post dated payments for remaining balance.
- H.** Participant's family must have a \$0 balance from other Mandel JCC programs in order for camp registration to be processed.
- I.** There is a \$20 fee for insufficient funds using check or credit card.
- J.** Mandel JCC Camps are not responsible for loss or damage to camper's property during the camping season.
- K.** To obtain Mandel JCC member rates, members must have valid Family membership at the time of registration and throughout the camp season.

We understand and recognize that there is always an inherent risk of bodily injury and harm associated with camping, horseback riding, boating activities, swimming, challenge rope courses, archery, and other camping activities. No warranties or representations of any kind have been made by The Mandel Jewish Community Center of Cleveland, its employees, agents, officers, directors, trustees, successors, or assigns regarding the activities at The Mandel JCC Day Camps. Signature of the

Waiver Release means that we and our child hereby personally assume all risks in connection with our child's participation in and attendance at The Mandel JCC Day Camps, or his or her participation in any related camp activities, unless caused by gross negligence or willful misconduct of any such person or entity. I have read and agreed to all Mandel JCC Day Camp policies listed above.

**MUST BE SIGNED BY BOTH PARENTS.**

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

Date \_\_\_\_\_

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

Date \_\_\_\_\_

**Hand deliver registration form or mail to:**  
 Mandel Jewish Community Center of Cleveland  
 26001 S. Woodland Road, Beachwood, OH 44122  
 attn: Day Camp Registrar



THE MANDEL JEWISH COMMUNITY CENTER  
 OF CLEVELAND

WE'RE RENOVATING & EXPANDING!

[www.mandeljcc.org](http://www.mandeljcc.org)