

## Keshet Boys Day Camp Application Summer 2011

Save up to \$100.00 off Both Sessions (Max \$50/session/camper)

If registration and deposit of \$150.00 per camper received **by May 1<sup>st</sup> 2011**

**Deposit to be applied to total camp fees.**

Fill out 1 Application Per Camper (for additional children photocopy form)

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

Parents' Names \_\_\_\_\_

Address \_\_\_\_\_ City, Zip \_\_\_\_\_

E-mail \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell (mom) \_\_\_\_\_ Cell (dad) \_\_\_\_\_

Does your child have allergies, please list? \_\_\_\_\_

Any medications or medical conditions we should be aware of? \_\_\_\_\_

Anything you would like us to know about your child to make this the best camp ever? \_\_\_\_\_

\_\_\_\_\_

**Address, telephone and email are the same as last summer**

My son will attend:  session 1 (6/21-7/15)  session 2 (7/18-8/12)  both sessions (8 weeks)

**Yes! I can volunteer to help supervise on trips**

- **Please understand that Keshet Boys Day Camp has a friendly, creative, Torah atmosphere where campers can enjoy themselves while developing their Middos.** There is a level of middos and behavior that is expected from all campers. Any camper that exhibits behavior that is detrimental to the running of Keshet Boys Day Camp and the safety or enjoyment of other campers will be asked to leave. If this should occur, no refund will be given.
- **Keshet Boys Day Camp is not responsible for lost or damaged items.**
- **Keshet Boys Day Camp welcomes parent participation, suggestions and support.** Please let us know if there are any activities you would like to see happen at camp or ways in which you would like to participate. Please list any ideas or activities you may want to do here \_\_\_\_\_  
\_\_\_\_\_
- **To Guarantee your space, apply early.** Complete the application, liability and medical releases and mail them with the deposit by May 1<sup>st</sup>.
- **Cancellation Policy**
  - ❖ After June 10 – no refund for session 1
  - ❖ After July 10 – no refund for session 2
  - ❖ Prior to the above dates, Keshet Boys Day Camp will retain a \$100.00 registration fee per camper, per session and refund the balance.
- **Upon receipt of your application, you will receive a confirmation packet that will include:**
  - ❖ Camp Schedule – subject to change
  - ❖ Hot Lunch Order Form
  - ❖ Contract detailing payment due dates and commitment to meet them.

**If you have any questions, please call Rabbi Moshe Tropper, Keshet Boys Day camp Director**  
**(818) 760-3556** (over)

• Son's Grade as of Sept. 2011 \_\_\_\_\_

Please sign that you have read the previous page and agree to the terms outlined:

Father's signature \_\_\_\_\_, Date \_\_\_\_\_ Mother's Signature \_\_\_\_\_, Date \_\_\_\_\_

Mail Application and Check in our self addressed envelop to Keshet Boys Day camp – 12702 Emelita St. Valley Village Ca. 91607

**Please make checks payable to Keshet Boys Day camp.**

## **Keshet Boys Day Camp Emergency Medical Release**

Fill out 1 Emergency Medical Release Form Per Camper (for additional children photocopy form)

Camper's Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City, Zip \_\_\_\_\_

Pediatrician's Name \_\_\_\_\_ Phone \_\_\_\_\_

Medical Insurance Name & Number \_\_\_\_\_

### **Emergency Information**

Mother's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Work Phone \_\_\_\_\_

In an emergency when parent / guardian cannot be reached, please contact the following:

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

### **Health History**

Past Medical Treatments and Operations (dates) \_\_\_\_\_

\_\_\_\_\_

Serious Injuries, disabilities or Chronic or Recurring Illness \_\_\_\_\_

\_\_\_\_\_

Allergies \_\_\_\_\_

Other Health Conditions Requiring Special Consideration \_\_\_\_\_

\_\_\_\_\_

We the parent/guardian authorize Keshet Boys Day Camp to arrange emergency medical care for the above named child while participating in an activity with Keshet Boys Day Camp.

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