



Winter Office:
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(718) 643-0771

Summer Office:
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Tolland, Massachusetts 01034
(413) 258-4463

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www.campkinderland.org

CAMPER REGISTRATION FOR 2008

Please enroll my child _____ for period indicated:

<u>CAMP SESSION</u>	<u>DATES</u>	<u>TUITION</u>
<input type="checkbox"/> 4 Weeks.....	Sunday, June 29 th - Saturday, July 26 th	\$3250
<input type="checkbox"/> 3 Weeks.....	Sunday, July 27 th - Saturday, August 16 th	\$2400
<input type="checkbox"/> 7 Weeks.....	Sunday, June 29 th - Saturday, August 16 th	\$4970

There is a \$250 discount for each additional child per family registering for 7 weeks; \$150 for 3 or 4 weeks.

The above rates include: medical insurance and medication not already covered by family insurance; laundry; special group activities, and canteen items. Additional fees include:

Transportation: There will be a transportation fee for campers taking the camp bus, \$30 each way.

Phone: There will be a phone usage fee, \$5 for 4 and 3 week campers, \$10 for 7 week campers.

Inter Trips: For campers turning 9 and 10 in 2008 there is an added \$75 special trip fee for July session.
Lower Senior Trip: For campers turning 11 in 2008 there is an added \$150 special trip fee for the July session only.
Upper Senior Trip: For campers turning 12 in 2008 there is an added \$225 special trip fee for the July session only.
Teen Trip: For campers turning 13 in 2008 there is an added \$275 special trip fee for the July session only.
14's Trip: For campers turning 14 in 2008 there is an added \$75 July trip fee and a \$325 special trip fee for the August session only.
For ALL August campers (except 14's) there is a \$50 daytrip fee.

CITs attend camp at special rates and complete a separate application and registration form.

Name of Camper _____ Date of Birth _____

Address _____ Zip _____

Phone _____ E-mail _____ Current Grade _____

Parent's Name _____

Address _____

Phone _____ Work Phone _____ Email _____

Parent's Name _____

Address _____

Phone _____ Work Phone _____ Email _____

Emergency Contact _____ Phone _____

Relationship to family _____

CAMPER REGISTRATION FOR 2008

I enclose \$ _____ deposit (\$850 deposit fee must accompany all registrations) and agree to pay half of the balance by 3/1/08 and the remainder by 4/30/08.

I, the undersigned parent or guardian, fully agree to the above payment dates, and to the following points:

1 - I hereby grant parental consent for all medical and dental treatment for my child during his/her stay in camp.

2 - Should I be unavailable for consultation for any medical or dental emergency my child incurs at camp, I grant permission to the Director to have my child's condition treated.

3 - I hereby grant parental consent for all out-of-camp trips.

4 - Personal belongings of the campers are protected with due care, but we cannot assume responsibility for loss or damage due to fire, theft, or laundry, etc. Parents must carry floater insurance to cover such risks.

5 - No refunds or allowances are made for late arrival or early departure during the camp season, or for campers who are asked to leave camp for flagrant violation of camp values or regulations. *In all other circumstances*, refunds will be made according to the following schedule:

For withdrawal before Feb 28th -: payment refunded in full.

For withdrawal from March 1st - March 31st: charge of 2 1/2 % full tuition.

For withdrawal from April 1st - June 1st: charge of 5% full tuition.

For withdrawal after June 1st - charge of deposit (\$850) + 10% full tuition.

6 - During the summer we take candid photos of our campers at their activities and intermittently throughout the summer we email all the parents a link so they can see what's going on at camp. If you DO NOT want us to include photos of your child, please check here _____.

7 - We may also use some photos for use in our advertising materials and our website. If you DO NOT want us to use your child's photo, please check here _____.

8 - Most groups take at least one trip to the movies during the summer, and are offered several choices of films that they can see. Some of the films may be rated PG-13. If you DO NOT want your child to see a PG-13 film please check here _____.

Signed: _____ Date _____
Parent or Guardian

Please make a copy of this form for your records.

**Check here _____
to receive a scholarship form.**

(OVER)