

JCC Lillian Schwartz Day Camp



"Fun is our tradition"

January 2011

Dear Camper Family:

We have received your request for financial assistance for the 2011 JCC Lillian Schwartz Day Camp at the Jewish Community Center of Staten Island. It is our goal to provide financial assistance to as many families as possible. In accordance with this goal, we are making changes to the financial assistance application process. By streamlining the process, we are hoping to be able to better serve you. Please take a moment to review the requirements and procedures listed below. As always, every consideration will be given to your request.

- A copy of your 2010 tax returns. (signed and dated) (Federal, State and Local)
- A copy of your 2010 W-2.
- Verification of other sources of income.
- A copy of your last 2010 pay stub.
- Profit and Loss statement, if you're self employed.
- Completed JCC Scholarship application.
- Your completed camp application.
- Payment for your camp deposit of \$200.00 per child made out to JCC.
- Payment for Gold membership made out to the JCC. (Excluded if a Platinum Member)

The Scholarship Committee will review your documentation and notify you by mail of the financial assistance package that is being offered. You will have 15 days in which to accept the package by mail. As part of the process your request may be referred to a JCC caseworker to ascertain your ability to pay prior to the scholarship award.

Please understand the JCC has limited funds for scholarships; therefore we will do our best to accommodate the number of requests. The JCC cannot provide scholarship fees for early bird, transportation or extended hours. **Please note that eligible first time camp scholarship applicants may only receive a scholarship award for 4 weeks.**

We take into consideration individual circumstances and also review applicants on an individual basis. You will also note that there is a space on the Scholarship Application that requests the amount of money you feel you can provide toward your camp tuition. Your prompt return of the materials requested will enable us to come to a decision quickly. **WE WILL NOT PROCESS INCOMPLETE APPLICATIONS!**

We strongly urge returning application material in person or by registered mail with a return receipt requested. We cannot be responsible for any items lost in the mail. Please return the above information to: JCC of Staten Island, JCC Scholarship Committee, Attention: Stacey Mathies, 1466 Manor Road, Staten Island, New York 10314.

Thank you for your interest in the JCC Lillian Schwartz Day Camp. We look forward to sharing a fun filled summer with you and your child.

Sincerely yours,

Vicki Roitman
Assistant Executive Director

P.S. Connect-to-Care, a UJA-Federation funded program that provides assistance with financial, legal, employment, financial counseling, social and crisis intervention resources, may be helpful. Please be aware that you may be contacted in the near future or for more information, call 718-475-5228.

Camp Committee
Co-Chairs
Susan Perel
Melissa Rabinovich

Camp Co-Directors
Glenn Wechsler, MSW
718.475.5231
Stephanie Feldman,
M.S., Ed., School Psychology
718.475.5232

Camp Staff Team
Rabbi Shmuel Bendet
Carrie Bernstein
James Cohen
Brian Faughnan
Megan Fidler
Lucy Kamil
Neshama Marcus
Lisa Quinn
Mike Reape
Jayne Smith

JCC President
Meirav Lev-Ari

Executive Director
David Sorkin

Assoc. Executive Director
Sheila Lipton

Ass't. Executive Director
Vicki Roitman



a beneficiary of
UJA Federation
of New York

Joan & Alan Bernikow Jewish Community Center
1466 Manor Road • Staten Island, New York 10314
July/August 718.983.9000 • Sept/June 718.475.5232/5231 • www.camp.sijcc.org

**Jewish Community Center of Staten Island
Lillian Schwartz Day Camp**

Scholarship Application
Due: March 31st 2011

Names of Children for Scholarship Consideration:

1. Camper's Last Name: _____ Camper's First Name: (1st Time Camper Y or N) _____

Entering Grade _____ in Sept. 2011 Date of Birth ____/____/____

2. Camper's Last Name: _____ Camper's First Name: (1st Time Camper Y or N) _____

Entering Grade _____ in Sept. 2011 Date of Birth ____/____/____

3. Camper's Last Name: _____ Camper's First Name: (1st Time Camper Y or N) _____

Entering Grade _____ in Sept. 2011 Date of Birth ____/____/____

Mother's Information:

Mother's Last Name: _____ Mother's First Name: _____

Driver License #: _____ Social Security #: _____

Address: _____ Martial Status: _____

Home Phone# _____ City: _____ State _____ Zip _____

Cell # _____

Mother's Place of Employment:

Self-Employed -Yes -No

Un-Employed - Yes - No

Work# _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Father's Information:

Father's Last Name: _____ Father's First Name: _____

Driver License #: _____ Social Security #: _____

Address: _____ City: _____ State _____ Zip _____

Home Phone# _____

Cell # _____

Father's Place of Employment:

Self-Employed -Yes -No

Un-Employed - Yes - No

Work# _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Do you receive scholarship assistance from other JCC Services:

- Membership -Pre-School -Daycare - After-School Other: _____

Other members living at home (example, Grandparents, step children, etc):

Applicants for camper scholarships must be prepared to pay the camp fee balance with post-dated credit card payments or electronic fund transfers beginning immediately after your scholarship award is accepted.

Average Monthly Expenses

Residence #1 Rent	___	Own	___	\$	_____	Residence #2 Rent	___	Own	___	\$	_____
Utilities				\$	_____	Car Payment #1				\$	_____
Insurance(car, life health)				\$	_____	Type/Year					_____
Doctor/Dentist				\$	_____	Car Payment #2				\$	_____
School Tuition				\$	_____	Type/Year					_____
Temple/Synagogue				\$	_____	Bank Loan				\$	_____
Other				\$	_____	Student Loan				\$	_____

I am able to provide \$ _____ for day camp attendance per child.

Do you have any additional unusually high expenses? Please explain. -Yes -No

2010 Income Information

Adjusted Gross Income 2010: _____

Other Income _____

Federal, State and Local Tax Withheld: _____

Estimated income for the current year: _____

Do you have any other source of income?

Yes No

If yes, from where and how much? (alimony, child support, rental property)

I understand that these arrangements are STRICTLY CONFIDENTIAL, and that I will not discuss my scholarship with anyone.

Applicant's Signature: _____ Date ____/____/____



JCC Lillian Schwartz Day Camp

"Fun is our tradition"

2011 Camp Application

Please complete the entire 4 page application and return with your payment to:

Joan & Alan Bernikow JCC • 1466 Manor Road, S.I., NY 10314 • 718-475-5261 • www.sijcc.org

or deliver to any JCC reception desk. For additional applications, please call the JCC or stop at the reception desk.

- K'TON TON
 SHALOM
 CHALUTZ
 MACCABIAH
 INDEPENDENCE
 RAMAH SPORTS CAMP
 NESIYAH (TEEN TRAVEL)
 CIT I
 CIT II
 GAN ISRAEL
 MARVIN'S CAMP (SPECIAL NEEDS)

Camper Information

CAMPER'S FIRST NAME:	LAST NAME:	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	GRADE ENTERING NEXT FALL:	DATE OF BIRTH:
ADDRESS:	CITY:	STATE:	ZIP:	
HOME PHONE:				
FRIEND WITH WHOM YOUR CAMPER WOULD LIKE TO BE GROUPED:			PRIMARY EMAIL ADDRESS (REQUIRED)	

Parent Information

PARENT 1: FULL NAME:	BUSINESS PHONE:	CELL PHONE:	EMAIL ADDRESS:
PARENT 2: FULL NAME:	BUSINESS PHONE:	CELL PHONE:	EMAIL ADDRESS:
CAMPER MAY BE RELEASED TO: <input type="checkbox"/> PARENT 1 <input type="checkbox"/> PARENT 2 <input type="checkbox"/> OTHER-PLEASE PROVIDE NAME & RELATIONSHIP:			

Emergency Information

PRIMARY PHYSICIAN:	PHONE:
HEALTH INSURANCE COMPANY:	INSURANCE I.D. #:
ANY MEDICAL, PSYCHOLOGICAL OR BEHAVIORAL CONCERNS:	ALLERGIES:
DOES YOUR CAMPER HAVE ANY SPECIAL NEEDS? (PLEASE DESCRIBE, USE SEPARATE SHEET IF NECESSARY)	
IN THE EVENT THAT YOU CANNOT BE REACHED IN AN EMERGENCY, WHO SHOULD BE CONTACTED?	
NAME:	PHONE:
CELL/PAGER:	RELATIONSHIP:

Please check weeks your camper will be attending.

(You must register for a minimum of 4 weeks of any combination of traditional and specialty camps)

- | | |
|--|--|
| <input type="checkbox"/> Week 1 June 29 - July 1 | <input type="checkbox"/> Week 5 July 25 - July 29 |
| <input type="checkbox"/> Week 2 July 5 - July 8 | <input type="checkbox"/> Week 6 August 1 - August 5 |
| <input type="checkbox"/> Week 3 July 11 - July 15 | <input type="checkbox"/> Week 7 August 8 - August 12 |
| <input type="checkbox"/> Week 4 July 18 - July 22 | <input type="checkbox"/> Week 8 August 15 - August 19 |

This camp is licensed by the New York City Department of Health and Mental Hygiene and is inspected twice yearly.

The inspection reports are filed at the Bureau of Food Safety and Community Sanitation, 253 Broadway, New York, NY 10007

RELEASE AND PERMISSION AGREEMENT

The undersigned acknowledges that he/she has read and agreed to the following terms and conditions:

- A. The undersigned is the parent or legal guardian legally authorized to enter into this agreement on behalf of the minor child named above;
- B. The undersigned, in consideration of the permission to utilize buses being leased by the Jewish Community Center in the furtherance of the undersigned's relationship with the Jewish Community Center, does hereby release and hold the JCC and/or the contracted transportation company harmless from any and all damages, losses, liabilities, expenses, costs (including attorney fees), claims, actions or suits of whatever kind or nature which undersigned, or the minor of any individual for which the undersigned is legal guardian, may now have or any time in the future may have against the JCC and/or the contracted transportation company arising out of the transportation of the minor of any individual for which the undersigned is legal guardian to and from the Jewish Community Center;
- C. Applications are accepted reserving the right and responsibility of camp administration to place camper by camp and division, according to age level and readiness standards. The Director(s) should be made aware of any special needs or limitations of the individual camper. Advance notice and an intake interview may be required in such circumstances.
- D. The JCC is not responsible for any personal belongings or items brought to camp, including all activities related thereto, by the minor named above which may be lost, broken, missing or stolen;
- E. I am fully aware of the risks inherent in various day camp activities and agree to hold harmless and will not hold the JCC, its instructors, employees, associates, agents, affiliates or any other entity or person associated with the JCC liable for any injury or loss that may occur during any JCC Day Camps session;
- F. I give permission for the minor child named above to swim and engage in all activities associated with swimming during JCC Camp;

- G. I give permission for the minor child named above to participate in field trips and overnight activities utilizing bus transportation provided by the JCC;
- H. I give permission for the JCC to use pictures and/or video of the minor child named above in any advertising or promotional material;
- I. The JCC, its instructors, employees, associates, agents, affiliates or any other entity or person associated with the JCC, is permitted to secure emergency medical/surgical treatment for the minor child named above that may be deemed necessary under the circumstances;
- J. If in the opinion of the camp staff, your child's behavior prevents their safe and/or successful participation in camp, we reserve the right to cancel your child's attendance;
- K. I understand that camp fees are NON-REFUNDABLE and NON-TRANSFERABLE.
- L. **BULLYING POLICY:** The JCC Lillian Schwartz Day Camp is committed to providing a safe, nurturing environment for both our campers and staff. We feel strongly that bullying is unacceptable. Bullying is defined as any action which hurts or threatens another person, either physically or mentally. Our camp will not tolerate any behavior which is emotionally or physically harmful to a camper or staff member. If a camper is verbally or physically abusive, a warning will be given. This will be documented and the parent/guardian will be contacted. If a second incident should occur, the camper will be spoken to and may lose certain camp privileges. The behavior will be documented and parent/guardian will be notified. If a camper has a third incident, he or she may be asked to leave camp. Absolutely no refund will be given if this occurs.

Parent's Signature _____

PAYMENT INFORMATION

IMPORTANT PAYMENT POLICY: ALL CAMP PAYMENTS ARE DUE IN FULL BY MAY 31. AFTER MAY 31 CAMPERS MAY BE ENROLLED WITH FULL PAYMENT DUE AT REGISTRATION. CAMP PAYMENTS CAN BE MADE USING CHECK, CASH, VISA, MASTERCARD OR AMEX. It is the policy of the JCC to apply all payments in a priority order. Only after Membership, Nursery School and all prior balances are fully paid may payment be credited to the Camp balance. Extended payment plans must be arranged prior to May 31. MasterCard, Visa, Amex may be required to guarantee payment plan.

I accept the payment terms and terms of enrollment as listed on this application and have completed all of the transportation and payment information.

Early Bird Rates: Deposit due by February 15 and full payment by April 15, 2011*†

I have enclosed payment in full.

Please charge payment in full to the credit card below.**

Please debit my checking account in full. Attached is a voided check.

I have enclosed a \$200 deposit. Please charge the balance to the credit card below on April 15.

I have enclosed a \$200 deposit. Please debit my checking account for the balance due on April 15. Attached is a voided check.

I have enclosed a \$200 deposit. Please debit my checking account in equal monthly installments for the balance due, commencing now through April 15. I have enclosed a voided check.

I have enclosed a \$200 payment. Please charge the balance to the credit card below in equal monthly installments commencing now through April 15.

Please charge the \$200 deposit now and the balance on April 15 to the credit card below.

Please debit my checking account for the \$200 deposit now and the balance due on April 15. Enclosed is a voided check.

Please charge the \$200 deposit now and the balance to the credit card below in equal monthly installments commencing now through April 15.

Please debit my checking account for the \$200 deposit now and the balance in equal monthly installments commencing now through April 15.

* Failure to make timely payments in accordance with the Early Bird deadline will jeopardize Early Bird status.

† Credit card or debit card information for balance **MUST** be provided in order to process application

Regular Rates: Full payment due by May 31, 2011

I have enclosed payment in full.

Please charge payment in full to the credit card below.**

Please debit my checking account in full. Attached is a voided check.

I have enclosed a \$200 deposit. Please charge the balance to the credit card below on May 31

I have enclosed a \$200 deposit. Please debit my checking account on May 31 for the balance due. Attached is a voided check.

Please charge the \$200 deposit now and the balance on May 31 to the credit card below.

Please debit my checking account for the \$200 deposit now and the balance due on May 31. Enclosed is a voided check.

I have enclosed a \$200 deposit. Please charge the balance to the credit card below in equal monthly installments commencing now through May 31.

I have enclosed a \$200 deposit. Please debit my checking account in equal monthly installments for the balance due,

commencing now through May 31. I have enclosed a voided check.

Please charge the \$200 deposit now and the balance to the credit card below in equal monthly installments commencing now through May 31.

Please debit my checking account for the \$200 deposit now and the balance in equal monthly installments commencing now through May 31.

† Credit card or debit card information for balance **MUST** be provided in order to process application

** Credit card information: Visa MasterCard American Express

Amount to be charged today \$ _____ Card Number _____ Exp. Date _____

Print name that appears on card _____ Signature _____

Billing Address _____ Zip _____

Note: After May 31, 2011 there will be no deposit refund. All registrations after May 31st must be paid in full at time of registration.

TRADITIONAL CAMP FEES

Early bird rate deadline February 15, 2011 • Please check appropriate camp:

K' TON TON

Ba Bayit
Ages 2.3 years
3 HALF DAYS

- Bernikow/Mid-Island
 Avis/South Shore
 Aberlin/North Shore

BUILDING ONLY
Mon, Wed, Fri only

6 week minimum	Early Bird	Regular
6 weeks	<input type="checkbox"/> \$765	<input type="checkbox"/> \$805
7 weeks	<input type="checkbox"/> \$870	<input type="checkbox"/> \$915
8 weeks	<input type="checkbox"/> \$935	<input type="checkbox"/> \$985

K' TON TON

at Henry Kaufmann Campgrounds

3 FULL DAYS Mon Tues Wed Thurs Fri

Ages 3 years to entering Kindergarten & toilet trained

6 week minimum	Early Bird	Regular
6 weeks	<input type="checkbox"/> \$1295	<input type="checkbox"/> \$1360
7 weeks	<input type="checkbox"/> \$1480	<input type="checkbox"/> \$1555
8 weeks	<input type="checkbox"/> \$1560	<input type="checkbox"/> \$1640

5 HALF DAYS

Ages 3 years to entering Kindergarten & toilet trained

4 weeks	Early Bird	Regular
5 weeks	<input type="checkbox"/> \$855	<input type="checkbox"/> \$900
6 weeks	<input type="checkbox"/> \$1065	<input type="checkbox"/> \$1120
7 weeks	<input type="checkbox"/> \$1140	<input type="checkbox"/> \$1200
8 weeks	<input type="checkbox"/> \$1230	<input type="checkbox"/> \$1295
8 weeks	<input type="checkbox"/> \$1320	<input type="checkbox"/> \$1390

5 FULL DAYS

Ages 3 years to entering Kindergarten & toilet trained

4 weeks	Early Bird	Regular
5 weeks	<input type="checkbox"/> \$1450	<input type="checkbox"/> \$1525
6 weeks	<input type="checkbox"/> \$1815	<input type="checkbox"/> \$1910
7 weeks	<input type="checkbox"/> \$1925	<input type="checkbox"/> \$2025
8 weeks	<input type="checkbox"/> \$2245	<input type="checkbox"/> \$2360
8 weeks	<input type="checkbox"/> \$2305	<input type="checkbox"/> \$2425

SHALOM

Entering Grades 1 & 2

5 Full Days	Early Bird	Regular
4 weeks	<input type="checkbox"/> \$1450	<input type="checkbox"/> \$1525
5 weeks	<input type="checkbox"/> \$1815	<input type="checkbox"/> \$1910
6 weeks	<input type="checkbox"/> \$1925	<input type="checkbox"/> \$2025
7 weeks	<input type="checkbox"/> \$2245	<input type="checkbox"/> \$2360
8 weeks	<input type="checkbox"/> \$2305	<input type="checkbox"/> \$2425

CHALUTZ

Entering Grades 3 & 4

5 Full Days	Early Bird	Regular
4 weeks	<input type="checkbox"/> \$1515	<input type="checkbox"/> \$1595
5 weeks	<input type="checkbox"/> \$1885	<input type="checkbox"/> \$1980
6 weeks	<input type="checkbox"/> \$1980	<input type="checkbox"/> \$2080
7 weeks	<input type="checkbox"/> \$2310	<input type="checkbox"/> \$2430
8 weeks	<input type="checkbox"/> \$2365	<input type="checkbox"/> \$2485

MACCABIAH

Entering Grades 5 - 7

5 Full Days	Early Bird	Regular
4 weeks	<input type="checkbox"/> \$1680	<input type="checkbox"/> \$1765
5 weeks	<input type="checkbox"/> \$2100	<input type="checkbox"/> \$2205
6 weeks	<input type="checkbox"/> \$2175	<input type="checkbox"/> \$2285
7 weeks	<input type="checkbox"/> \$2550	<input type="checkbox"/> \$2680
8 weeks	<input type="checkbox"/> \$2615	<input type="checkbox"/> \$2750

GAN ISRAEL

4 weeks	<input type="checkbox"/> \$1110
5 weeks	<input type="checkbox"/> \$1365
6 weeks	<input type="checkbox"/> \$1425
7 weeks	<input type="checkbox"/> \$1600
8 weeks	<input type="checkbox"/> \$1700

RAMAH SPORTS CAMP

Entering Grades 2 - 8

July 11 - July 15	Soccer Academy	<input type="checkbox"/> \$375
July 19 - 22	Soccer Academy	<input type="checkbox"/> \$375
July 25 - July 29	Baseball Camp	<input type="checkbox"/> \$425
August 1 - August 5	Basketball Camp	<input type="checkbox"/> \$375
August 8 - August 12	Basketball Camp	<input type="checkbox"/> \$375

TEENS

NESIYAH/TEEN TRAVEL

Entering Grades 7 - 9

4 weeks	Early Bird	Regular
5 weeks	<input type="checkbox"/> \$2195	<input type="checkbox"/> \$2305
6 weeks	<input type="checkbox"/> \$2750	<input type="checkbox"/> \$2890
7 weeks	<input type="checkbox"/> \$2820	<input type="checkbox"/> \$2965
8 weeks	<input type="checkbox"/> \$3395	<input type="checkbox"/> \$3565
8 weeks	<input type="checkbox"/> \$3570	<input type="checkbox"/> \$3750

ETGAR/CIT I

Entering Grades 9-10

8 weeks	<input type="checkbox"/> \$3565
---------	---------------------------------

GESHER/CIT II

Entering Grade 10

8 weeks	<input type="checkbox"/> \$1450
---------	---------------------------------

SPECIAL NEEDS

MARVIN'S CAMP

Special Needs Camp for ages 6 - teens

6 weeks July 5 - August 12	<input type="checkbox"/> \$1980
----------------------------	---------------------------------

INDEPENDENCE

Diabetes Camp for ages 5 - 12

4 weeks July 5 - July 29	<input type="checkbox"/> \$1635
--------------------------	---------------------------------



A Traditional, Teen or Special Needs
Camp Total \$ _____

If you are using any of these additional services, please check the appropriate boxes.

SPECIALTY CAMP at NEW JERSEY "Y" CAMP

Sleep-A-Week (option 1)

Grades 3 -6 (week 5) July 25 - July 29 \$700

Sleep-A-Week Specialty (option 2)

Grades 1 - 10 (week 7) August 7 - August 12 \$1100

Please select one of the following:

- Lenny Krayzelburg Swim Camp
- Herb Brown Basketball Camp
- Maccabi Great Britain Soccer Camp
- Ron Blomberg Baseball Camp
- Israel Tennis Centers Tennis Camp
- 92nd Street Y Ceramics Camp
- 92nd Street Y Painting Camp
- 92nd Street Y Jewelry Making Camp (grades 7 - 10)
- The Planetary Society Astronomy Camp
- Ergo Media Cinematography Camp (grades 7 - 10)
- Physics Camp
- Physiology & Kinesiology Camp
- Chemistry Camp
- LaCrosse Camp

C Specialty Camp Total \$ _____

EXTENDED HOURS FEES

	Mornings	Afternoons	Both
4 weeks	<input type="checkbox"/> \$265	<input type="checkbox"/> \$285	<input type="checkbox"/> \$375
5 weeks	<input type="checkbox"/> \$285	<input type="checkbox"/> \$310	<input type="checkbox"/> \$395
6 weeks	<input type="checkbox"/> \$310	<input type="checkbox"/> \$330	<input type="checkbox"/> \$410
7 weeks	<input type="checkbox"/> \$330	<input type="checkbox"/> \$350	<input type="checkbox"/> \$430
8 weeks	<input type="checkbox"/> \$350	<input type="checkbox"/> \$370	<input type="checkbox"/> \$460

G Extended Hours Total \$ _____

PROJECT CHALLAH

\$3.75 per week

4 weeks	<input type="checkbox"/> \$15
5 weeks	<input type="checkbox"/> \$18.75
6 weeks	<input type="checkbox"/> \$22.50
7 weeks	<input type="checkbox"/> \$26.25
8 weeks	<input type="checkbox"/> \$30

H Project Challah Total \$ _____

MEMBERSHIP

A full year JCC Gold or Platinum Family Membership is required to enroll your child in our camp. JCC Gold Family membership allows your family to participate in our programs and activities for one year, including use of the Fitness Center at the Avis/South Shore JCC. JCC Platinum Family Membership entitles your family to all the benefits of Gold Family Membership and allows your family to utilize the Fitness Center, indoor swimming pool and outdoor summer swim club at the Bernikow JCC.

If you are not already a member, your membership application and fee must accompany the camp application.

Your membership begins when your camp application is received. Memberships that expire during the camp season must be renewed by May 31. Teen membership fee is not applicable for camp.

I Membership \$ _____

POST-CAMP PROGRAMS

Post-Camp One Week Specialty Camps

Week 9 August 22 - 26 \$315

Week 10 August 29 - September 2 \$315

V Pre & Post Camp Fees \$ _____

BUS FEES

	one way	both ways
4 weeks	<input type="checkbox"/> \$295 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$540
5 weeks	<input type="checkbox"/> \$320 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$590
6 weeks	<input type="checkbox"/> \$340 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$630
7 weeks	<input type="checkbox"/> \$365 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$680
8 weeks	<input type="checkbox"/> \$385 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$720

3 DAYS (K'TON TON ONLY)

4 weeks	<input type="checkbox"/> \$190 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$330
5 weeks	<input type="checkbox"/> \$205 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$360
6 weeks	<input type="checkbox"/> \$217 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$385
7 weeks	<input type="checkbox"/> \$230 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$410
8 weeks	<input type="checkbox"/> \$242 <input type="checkbox"/> am <input type="checkbox"/> pm	<input type="checkbox"/> \$435

Pick up address: _____

(If other than home address)

Nearest cross street: _____

Drop off address: _____

(If other than home address)

Nearest cross street: _____

E Bus Fees Total \$ _____

SIBLING DISCOUNT The JCC will deduct \$100 for each additional child after the first, when you enroll each child in camp for 5 full days a week for the 8 week session.

F Sibling Discount \$ _____

PARENT'S WORKSHEET

CAMP FEE K'Ton Ton, Shalom, Chalutz, Maccabiah, Ramah, Nesiyah, CIT I, CIT II, Marvin's Camp or Independence

A \$ _____

SPECIALTY CAMP FEE + **C** \$ _____

PRE/POST CAMP FEE + **V** \$ _____

BUS FEE + **E** \$ _____

SIBLING DISCOUNT(if applicable) + **F** \$ _____

EXTENDED HOURS FEE + **G** \$ _____

PROJECT CHALLAH FEE + **H** \$ _____

MEMBERSHIP FEE (if applicable) + **I** \$ _____

SEND A KID TO CAMP SCHOLARSHIP (yes, I want to donate) \$ _____

GRAND TOTAL \$ _____