

ABERDEEN COUNTRY DAY CAMP @ TAB RAMOS SPORTS CENTER

17 Blair Road, Aberdeen, New Jersey 07747 - (732) 290-0003 - Fax: (732) 290-7767

2012 ENROLLMENT APPLICATION

Campers Name _____ Sex _____ Age _____ Date of Birth _____ Age at camp _____

Address _____ Town _____ Zip _____

Home Phone _____ New Camper _____ Previous Camp Attended _____

Father's Name _____ Bus. Phone _____ Cell No. _____

Mother's Name _____ Bus. Phone _____ Cell No. _____

Emergency Person _____ Phone _____ Relationship _____

Family Physician _____ Phone _____

Email address: _____

| WEEK STARTING | 6/25 | 7/02 | 7/09 | 7/16 | 7/23 | 7/30 | 8/06 | 8/13 | 8/20 | 8/27 | | |
|-------------------------------|-------------|--------|------|------|------|------|------|------|------|-------|------------|--------|
| Full day-5 days | WK 1 | 4 days | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | NO MONDAY | CIRCLE |
| Full day-4 days 8:30am-3:30pm | WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK10 | M T W TH F | DAYS & |
| Full day-3 days | WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK10 | M T W TH F | WEEKS |
| | 4 days only | | | | | | | | | | | |
| Half day-5 days | WK 1 | | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | | CIRCLE |
| Half day-4 days 8:30-11:30am | WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | M T W TH F | DAYS & |
| Half day-3 days | WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | M T W TH F | WEEKS |
| Half day-5 days | WK 1 | | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | | CIRCLE |
| Half day-4 days 12:20- 3:30pm | WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | M T W TH F | DAYS & |
| Half day-3 days | WK 1 | WK 2 | WK 3 | WK 4 | WK 5 | WK 6 | WK 7 | WK 8 | WK 9 | WK 10 | M T W TH F | WEEKS |

A **non-refundable \$60.00** registration fee and two weeks camp fees are required with each application. Campers must attend a minimum of two weeks. Camp dates in June/July must be paid in full by June 1st. Camp for August must be paid in full by July 1st. ****Any customer who has cancelled weeks in prior years must pay in full by June 1st. There are NO MAKE UP DAYS for absences or days missed.** There are **no refunds** for closings, incidental absences, or withdrawals from camp. No camp dates will be held without payment. No exceptions can be made. Tuition and registration fee include trips with transportation, snacks, special programs and supplies.

| | |
|------------------------------------|------------------------------------|
| Full day - 5 days \$ 225.00 | Half day - 5 days \$ 160.00 |
| 4 days \$ 205.00 | 4 days \$ 150.00 |
| 3 days \$ 185.00 | 3 days \$ 140.00 |

I understand I may withdraw from camp at any time before May 31, 2012, less the \$60.00 non-refundable registration fee per child. After May 31, 2012, **NO** tuition will be refunded. There are **NO REFUNDS** for camp closings, incidental absences, transportation delays, or withdrawals from camp. No allowance or credit will be issued for missed, cancelled or changed weeks. I also understand that if my child's balance is not paid by the due date, my child's enrollment will be subject to cancellation. All necessary paperwork and forms must be completed and returned to Tab Ramos Sports Center (Aberdeen Country Day) prior to the start of camp. I understand if the required paperwork is not completed and returned on time, my child will not be allowed to attend camp. I have read the above and the back page of this enrollment form, and fully understand and give permission for all stated policies listed thereof.

DATE _____ PARENTS SIGNATURE _____

NOTES:

NO REFUNDS, NO CREDITS, NO SWITCHING OF DAYS, NO TRANSFERS AND NO MAKE UP DAYS.

CAMP PERMISSION SLIPS

Permission is hereby granted to Aberdeen Country Day @ Tab Ramos Sports Center to take my child on local trips outside of camp as part of the regular camp program.

PICTURES

Parent hereby grants permission for photographs to be taken on the premises of Aberdeen Country Day and Aberdeen Country Day has the right to utilize these photographs in camp brochures or display photography.

EMERGENCY

In the event that you or your family physician cannot be contacted in an emergency you hereby grant permission for Aberdeen Country Day to bring your child to the emergency room of Bayshore Community Hospital.

MEDICAL RELEASE

I hereby give permission to the medical personnel selected by the Camp Director to provide routine healthcare.

ACTIVITIES

My child has permission to engage in all programmed camp activities, except as noted on the camper's medical form.

SWITCHING DAYS & WEEKS

Absolutely no switching of days or weeks will be allowed after May 31st, 2012 and then it's only if we can accommodate your request.

LUNCHES

Lunches can be purchased in advance for \$4.50 per day, and may be paid for at the start of the camp week or on the morning of camp.

BEFORE CARE/AFTER CARE

Aberdeen Country Day will provide before care 7:30 a.m. and after care 3:30 to 6:00 p.m. for \$6.00 per hour per child (full hour). This service may be paid for prior to the start of the camp week or on the camp day it is needed. There is a family or individual maximum of \$60.00 per family for before/aftercare.

TARDINESS

A five minute grace period is given for anyone picking up their child. If you are more than 5 minutes late, you will be charged \$6.00 for aftercare to be paid immediately.

DISMISSAL OF CAMPER

The camp reserves the right to dismiss any camper whose condition, conduct, influence, or behavior is deemed unsatisfactory or detrimental to the best interest of the camper or fellow campers. In these instances, refunds will be issued only at the discretion of the camp director.

MEDICAL INFORMATION AND PAPERWORK

All necessary paperwork and forms must be completed and returned to Tab Ramos Sports Center (Aberdeen Country Day) prior to the start of camp. I understand if the required paperwork is not completed and returned on time, my child will not be allowed to attend camp.

TUITION REFUND POLICY

I understand I may withdraw my child/children from camp up until May 31, 2012. All monies paid less the \$60.00 non-refundable registration fee, per child, will be returned. After May 31, 2012, **NO** tuition will be refunded. ****Anyone canceling weeks which they have not paid for will not be entitled to the payment policy and will have to pay in full before June 1st. This policy extends to previous years.**** There are **NO REFUNDS** for camp closings, incidental absences, transportation delays, or withdrawals from camp. No allowance or credit will be issued for missed, cancelled or changed weeks. I also understand that if my child's balance is not paid by the due date, my child's enrollment will be subject to cancellation. In the event my child is absent from camp due to an accident or sickness, (as certified by a physician) we will refund as follows: one half (1/2) of each day absent with a doctor's note.

**ABERDEEN COUNTRY DAY @ TAB RAMOS SPORTS CENTER
NOTICE OF UNDERSTANDING**

I, _____ HAVE READ AND DO UNDERSTAND THE REFUND POLICY AND THE POLICY OF CHANGING, DELETED, AND ADDING DAYS, AS SET FORTH BELOW:

1. NO TUITION will be refunded after May 31, 2012. Tuition is refundable on or before May 31, 2012 less the \$60.00 registration. _____ Initial
2. There are no make-up days for absences or days missed. _____ Initial
3. There are no transfers of days, no changing one day to another and no changing of a day to another person/camper. _____ Initial
4. No refunds for withdrawals from camp, closings, or incidental absences. _____ Initial
5. If required paperwork is not submitted prior to start of camp, child will not be allowed to attend camp and money will not be refunded. _____ Initial
6. If any money is owed, child's enrollment is subject to cancellation. _____ Initial
7. Changes to enrollment can be made up to May 31st, 2012 provided we can accommodate you. After May 31st, 2012 no changes can be made. _____ Initial
8. No refunds, credits or allowances will be made for missed, cancelled or changed days/weeks. _____ Initial
9. If you cancel or withdraw any committed day(week), payment plan is voided and all money due must be paid by June 1st. _____ Initial
10. Refunds will be made for one half (1/2) of each day absent with a doctor's note. _____ Initial

Dated: _____

Child's name: _____

Parent/guardian's signature: _____

Over the years we have received so many requests for changes that we can't keep up with the demand. The procedure to make changes is very cumbersome. The above policy is on the enrollment form which you sign.

I'm sorry for any inconvenience, but please don't ask us to change days and times. If you want to add a day and we can, we will, but we have hired counselors based on the amount of campers we have for any particular day. We must also (under State Law) have so many counselors per campers and with everyone making changes, it's hard to keep track.

I do hope you understand our dilemma.

Thank you, Pat Sellitto, Camp Director
(GIVE COPY OF ABOVE TO CUSTOMER)