

TUITION CONTRACT

Between BETH SHOLOM DAY CAMP, located on 401 Roslyn Road @ Roslyn Heights, NY 11577

(hereinafter referred to as THE CAMP) and _____ (hereinafter referred to as THE PARENT).
Parent's Name

Check ONE: Super Early Bird Rates Is bus transportation required?
 Regular Rates Yes No

Please Fill in Appropriate names, fees, and discounts
(The Children Named Below Are Hereinafter Referred to as THE CHILD)

PROGRAM CODES: FD=Full Day ♦ MD=Mini-Day
 SA=Sports Academy ♦ TW=Tween Experience ♦ CIT=CIT

Child's Full Name Camper	Tuition Fee	Total #	Temple Member	Sibling	Transportation
	AS NOTED	of Weeks	Discount	Discount	Discount*
				Discount	Fee
1. _____	\$ _____	_____	\$ _____	-	\$ _____
2. _____	\$ _____	_____	\$ _____	-	\$ _____
3. _____	\$ _____	_____	\$ _____	-	\$ _____
4. _____	\$ _____	_____	\$ _____	-	\$ _____
Security Fee					<u>+ \$35.00</u>
TOTAL CAMP FEE for Summer 2013 = \$ _____					

* If transportation service is not used, there will be a \$25 per week reduction in price.

TERMS OF AGREEMENT

The Camp Will Provide:

1. Professional supervision at all times.
2. Age appropriate activities and trips.
3. Supervised transportation between home and camp. Mode of transportation (van or bus) to be determined by camp. Time of pick-up or drop-off cannot be guaranteed prior to camp. Length of runs will be reasonable depending upon location of home. There will be a \$25 per week reduction if transportation is not needed.
4. Accident and medical insurance.
5. Kosher lunch and snack.
6. One camp shirt to be worn on Fridays and off-campus trips.

The Parent Will Agree to:

1. Provide a \$500 deposit for each child at the time of registration. This deposit is fully refundable until February 1, 2013. After that date, there will be a \$250 administration charge. **However after May 1, 2013, deposits will not be refunded.**
2. There is a \$250 referral fee for recommending new campers. One referral fee per family, unlimited children.
3. Make full payment of balance of fee by May 15, 2013. Bus service will not be provided unless account is clear. **Absolutely NO exceptions!**
4. Submit a completed medical by June 1, 2013. Bus service and camp will not start unless a completed medical is filed. Please retain the pink (bottom) medical for your own records.

1. There will be no refund at any time during the season for camper absence. For illnesses of five consecutive days or more in duration (with medical certification) an appropriate extension or credit for next year will be issued.
2. The camp reserves the right to cancel service for any camper whose payment is not in order.
3. Registration is subject to availability of space at time of receipt of deposit.
4. The camp reserves the right to cancel enrollment of any camper who does not demonstrate reasonable age appropriate standards of behavior (as determined by the camp).
5. If the parent requests reduction in weeks after the start of camp, there will be a credit issued toward next summer's tuition.
6. If the camp determines that it cannot provide adequate supervision or facilities for campers with special needs, it reserves the right to terminate enrollment of such campers.
7. Parent agrees to adhere to camp rules with respect to visiting and parking.
8. Any misrepresentation on the camper registration form or this contract will void the agreement; Refunds will not be made if this occurs.
9. Parent agrees to keep child at home if camper contracts a contagious disease.
10. Requests for placement of children with same grade friends will be done according to group size and cannot be 100% guaranteed. No negative requests will be considered.
11. Special Activity Calendars are subject to change due to weather/scheduling problems and may have to be adapted and/or modified as deemed necessary by Beth Sholom Day Camp.
12. It is understood that all photography taken at BSDC may be used for promotional purposes.
13. The camp must be informed of any special custodial arrangement regarding children of divorced or separated parents. Where necessary, copies of decrees involving custody must be shown to camp administration.
14. The camp reserves the right to deny participation in any activity, day excursion, or overnight in which the camp deems the participation/presence of the camper would be dangerous or distracting to the camper, to other campers, or to staff members. Alternate activities at camp would be provided.
15. The camp reserves the right to share medical information with all staff members when necessary.
16. The Nassau County Health Dept. inspects our facilities once prior to camp and once during camp.

By signing here you are also acknowledging that you are responsible for payment of all camp fees.



Parent's Signature

Date

Trip and Activity Authorization

I hereby give permission for my child/children to participate in all trips and activities as outlined in the special events calendar and the weekly newsletter. Permission slips will be needed for some trips. In addition, I give permission for participation in all out of camp rainy day activities. I understand that if I do not want my child to participate in any activity, the camp must be advised in writing.



Parent's Signature