



**TEMPLE EMANU-EL ECC  
CAMP RUN-ABOUT  
FOR CHILDREN 12 MONTHS AND OLDER**

**DAY CAMP APPLICATION 2019  
(PLEASE PRINT CLEARLY)**

Child's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Circle One: Male Female  
 (Last) (First)

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

Name of Parent 1 \_\_\_\_\_ Name of Parent 2 \_\_\_\_\_

Parent 1 Primary Phone \_\_\_\_\_ Parent 2 Primary Phone \_\_\_\_\_

Your child's previous ECC class \_\_\_\_\_ Primary Email \_\_\_\_\_

**CHECK DESIRED SCHEDULE FOR ENROLLMENT**

<b>SESSION I</b> <b>Monday, June 17-Friday, July 5</b> <b>Camp closed Thursday, July 4</b>	<b>SESSION II</b> <b>Monday, July 8-Friday, July 26</b>	<b>SESSION III</b> <b>Monday, July 29</b> <b><u>CAMP ENDS THURSDAY, August 15</u></b>
<p style="text-align: center;"><b><u>Mornings 9:00-12:25</u></b></p> <p>___ Monday            ___ Tuesday            ___ Wednesday            ___ Thursday            ___ Friday</p> <p style="text-align: center;"><b><u>Full Day 9:00-3:00</u></b></p> <p>___ Monday            ___ Tuesday            ___ Wednesday            ___ Thursday            ___ Friday</p>	<p style="text-align: center;"><b><u>Mornings 9:00-12:25</u></b></p> <p>___ Monday            ___ Tuesday            ___ Wednesday            ___ Thursday            ___ Friday</p> <p style="text-align: center;"><b><u>Full Day 9:00-3:00</u></b></p> <p>___ Monday            ___ Tuesday            ___ Wednesday            ___ Thursday            ___ Friday</p>	<p style="text-align: center;"><b><u>Mornings 9:00-12:25</u></b></p> <p>___ Monday            ___ Tuesday            ___ Wednesday            ___ Thursday            ___ Friday</p> <p style="text-align: center;"><b><u>Full Day 9:00-3:00</u></b></p> <p>___ Monday            ___ Tuesday            ___ Wednesday            ___ Thursday            ___ Friday</p>

All children bring lunch; beverage and care provided.

I enclose my NON-REFUNDABLE, NON-TRANSFERABLE deposit of \$100.00 per session. I understand the deposit will be deducted from my final payment. A 10% sibling reduction in camp fees will be given. Where tuition rates differ, the discount will apply to the lowest rate. You may request one friend for your child to be with but final placement is at the discretion of the director.

PLEASE NOTE: Temple Emanu-El Early Childhood Community reserves the right to terminate enrollment, at any time, with or without cause, by giving the other party notice of termination.

I hereby give my permission for my child to participate in all programs, including photographs/Facebook, activities and field trips as part of the 2019 Temple Emanu-El Early Childhood Community Day Camp. I understand and fully recognize that risks are involved. I hereby release Temple Emanu-El Early Childhood Community Day Camp, or any of its employees, from any liability arising out of any injury to my child.

Date \_\_\_\_\_

\_\_\_\_\_  
Parent's Signature