the ECC
EARLY CHILDHOOD COMMUNITY
Temple Emanu-El

14450 West Ten Mile Road, Oak Park, MI 48237
Phone: 248.967.4847 E-mail: Nurseryadmin@emanuel-mich.org

CAMP RUN-ABOUT

FOR CHILDREN 12 MONTHS AND OLDER

DAY CAMP APPLICATION 2024

(PLEASE PRINT CLEARLY)

Child's Name _____ _____ Birth Date _____
(Last) (First)

Address _____ City _____ State _____ Zip _____

	Parent 1	Parent 2
Name		
Primary Phone		
E-mail		

SESSION I Monday, June 17-Friday, July 5 No Camp Thursday, July 4	SESSION II Monday, July 8-Friday, July 26	SESSION III Monday, July 29 CAMP ENDS THURSDAY, August 15
Mornings 9:00-12:25 ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday	**Mornings 9:00-12:25** ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday	**Mornings 9:00-12:25** ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday
Full Day 9:00-3:00 ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday	**Full Day 9:00-3:00** ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday	**Full Day 9:00-3:00** ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday

I enclose my NON-REFUNDABLE, NON-TRANSFERABLE registration fee of $120.00 per session. I understand the $100.00 deposit will be deducted from my final payment. The remainder is a security fee per session. A 10% sibling reduction in camp fees will be given. Where tuition rates differ, the discount will apply to the lowest rate. In the event of an extended closing due to unforeseen circumstances, tuition will be reduced by 50%.

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 2024 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