



## 2017-2018 REGISTRATION FORM CAMP SHALOM KATAN, 18 MONTH OLDS

### Children must be 18 months old by their first day of camp attendance

#### FEES AND HOURS

Camp Shalom Katan offers 10 fun-filled exciting sessions.  
 Each camp session is a week long - Monday through Friday, 8:30am – 1:00 pm.  
 Extended day options are available, 7:30am – 5:30pm.

- 2 days per week \$118
- 3 days per week \$168
- 4 days per week \$222
- 5 days per week \$267
- Drop in day \$65/day

**Registration forms are due by May 1:** There is a non-refundable \$30 registration fee which includes a Camp Shalom Katan T-shirt.  
**Registration received after May 1** will require a \$60 registration fee.

#### CHILD INFORMATION

Child's Name:	Birth date:	Age:	Sex:
	/ /		<input type="checkbox"/> M <input type="checkbox"/> F
Parent 1 Name:	Parent 1 Email:		
Parent 2 Name:	Parent 2 Email:		
Primary Street address:	Parent 1 Cell Number:	Parent 1 Daytime Number:	
	( )	( )	
Parent 2 Street address:	Parent 2 Cell Number:	Parent 2 Daytime Number:	
	( )	( )	

**T-SHIRT SIZE:** \_\_\_ 2T \_\_\_ 3T \_\_\_ 4T \_\_\_ 5/6T

Please check the session and days of the week you would like your child to attend. **There is a minimum of 2 days per week, and the days you choose MUST remain the same throughout the summer. This form is FINAL. Once you've turned it in you will be accommodated if it is received prior to May 2.** You will be billed on **June 1** for sessions 1-5, and July 1 for sessions 6-10. Payment is due on the 15<sup>th</sup> of the month regardless of your child's attendance. **Payment late fee will be applied for session 1-5 balances not paid by July 1.** Payment late fee will be applied August 1 for any remaining Camp Shalom Katan balances.

	Monday	Tuesday	Wednesday	Thursday	Friday
Session 1: <b>June 18-22</b>					
Session 2: <b>June 25-29</b>					
Session 3: <b>July 2-July 6 *</b>					
Session 4: <b>July 9-13</b>					
Session 5: <b>July 16-20</b>					
Session 6: <b>July 23-27</b>					
Session 7: <b>July 30- August 3</b>					
Session 8: <b>August 6-10</b>					
Session 9: <b>August 13-17</b>					
Session 10: <b>August 20-24</b>					

\* This is a four day week, due to July 4, when Gan HaYeled is closed.

**Gan HaYeled Extended Care (Age 18 Months) - SUMMER 2018 – Due May 1, 2018**  
**Extended Care Enrollment Policies**

1. All families must complete a new extended care enrollment form for Summer 2018.
2. We will hire/schedule staff based on extended care contracts received by **May 1, 2018**.
3. You will be billed at the beginning of each month and are responsible for payment for the extended care you have reserved (even if your child is, for some reason, unable to attend) for the entire semester.
4. Permanent extended care schedule **changes after May 15 will be based on availability** and require a \$15.00 processing fee, and an updated extended care form. **NO contractual changes can be made to extended care schedule after June 1, 2018.**
5. You are expected to pick up your child at or before the end of your contracted time. **If you are late for pick up you will be charged \$20 for the first 5 minutes and \$5 for each additional minute.** No more than two warnings will be given. In many cases if your child stays beyond their contracted time, a teacher has to stay past their scheduled time to keep Gan HaYeled in compliance with staff to child ratios for licensing.
6. As always, we will make every effort to accommodate all of our Gan family's needs. Drop-in care will still be available as space permits. Please make arrangements with the Director. **A minimum of 24-hour notice is required for drop-in care.** Drop-in care fees will be attached to the tuition bill **following the month the service was used.**

Fee Schedule Per Day:

Time	Session	Contracted	Drop-in
7:30-8:30	Very early morning	\$7.00	\$13.00
8:00-8:30	Early morning	\$4.00	\$7.00
1:00-3:30	Stories, rest, snack	\$13.00	\$22.00
3:30-5:00	Afternoon	\$9.00	\$14.00
3:30-5:30	Late afternoon	\$10.00	\$16.00

Child's Name \_\_\_\_\_

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
7:30-8:30					
8:00-8:30					
1:00-3:30					
3:30-5:00					
3:30-5:30					
<b>Total \$/ Day</b>					

Total amount owed per week \$ \_\_\_\_\_

I agree to comply with the above enrollment policies. Failure to comply with policies and payments will result in not being able to use extended care services.

Signature of Parent: \_\_\_\_\_ Date: \_\_\_\_\_