

Please select a Campus Baldwin Bellmore Hicksville Northport Valley Stream

CAMPER INFO

Camper's Name _____ Gender _____ Birth Date _____ Age (as of June 25, 2012) _____
First Name Last Name

Current Grade _____ School Currently Attending _____ Years at CRU _____ Previous Camp _____

Home Address _____ Phone _____
Street City State ZIP

T-Shirt Size (Please Select One) **Youth Sizes** Small (6-8) Medium (10-12) Large (14-16) **Adult Sizes** Small Medium Large Extra Large

Where did you hear about Camps 'R' Us? Radio TV Internet Magazine Friend/Family/Colleague Outdoor Ad School Activity CRUiser

PARENT/GUARDIAN INFO

Mother's Name _____ E-mail Address _____
or Guardian's Name

Home Address *If different from camper* _____
Street City State ZIP

Home Telephone # _____ Work Telephone # _____ ext. _____ Cellular Telephone # _____
If different from camper

Father's Name _____ E-mail Address _____
or Guardian's Name

Home Address *If different from camper* _____
Street City State ZIP

Home Telephone # _____ Work Telephone # _____ ext. _____ Cellular Telephone # _____
If different from camper

Parents' Marital Status Married Separated Divorced Other _____

Camper lives with Both Parents Mother Father Other _____

If camper lives with a single parent, is there another adult/guardian who has access to the camper? Yes No N/A

If yes... Name _____ Relation to Camper _____

Home Telephone # _____ Work Telephone # _____ ext. _____ Cellular Telephone # _____
If different from camper

EMERGENCY CONTACT INFO

The following persons must be at least 18 years old, and will be contacted, in the order listed, if the camper's parents/guardians are unreachable for any camp matters. In addition, only those persons named below (other than those listed above in the Parent Information section) will be granted access to the camper.

1. Name _____ Relation to Camper _____
 Home Telephone # _____ Work Telephone # _____ ext. _____ Cellular Telephone # _____

2. Name _____ Relation to Camper _____
 Home Telephone # _____ Work Telephone # _____ ext. _____ Cellular Telephone # _____

3. Name _____ Relation to Camper _____
 Home Telephone # _____ Work Telephone # _____ ext. _____ Cellular Telephone # _____

The following person (if any) MAY NOT have access to this camper.

Name _____ Relation to Camper _____ Order of Protection? Yes No
If yes, please submit a copy of the court order.

SESSION/GROUPING INFO

Step 1. Select your camp program.

- Tiny Tots (TT)
- KinderKamp (KK)
- Division 12
- Division 34
- Division 56
- C2 Program
- Voyagers Trip & Travel Program*
(June 25th - July 20th only)

Step 2. Select your weeks (excludes Voyagers).

- Week 1: June 25th - June 29th
- Week 2: July 2nd - July 6th
- Week 3: July 9th - July 13th
- Week 4: July 16th - July 20th
- Week 5: July 23rd - July 27th
- Week 6: July 30th - August 3rd
- Week 7: August 6th - August 10th
- Week 8: August 13th - August 17th

Step 3. Select your days (excludes Voyagers).

- 5 Days - Monday, Tuesday, Wednesday, Thursday, Friday
- 3 Days (A) - Monday, Wednesday, Friday
- 3 Days (B) - Tuesday, Wednesday, Thursday

*Voyagers option - select free add-on weeks.

- Week 5: July 23rd - July 27th
- Week 6: July 30th - August 3rd
- Week 7: August 6th - August 10th
- Week 8: August 13th - August 17th

I would like my child to be in the same group as: 1) _____ 2) _____

Children will be grouped together only if they are the same age, in the same grade, enrolled in the same weeks, and the request is mutual.

ENROLLMENT AGREEMENT

Camps 'R' Us, New York LLC may register my child for the 2012 summer camp season as indicated on page 1 of this enrollment form. The cost for the summer of 2012 will be based on the selection of weeks and days, as set forth in the fee schedule located below and at CampsRUs.org. All camp fees are due on or before May 1, 2012 (or within 10 business days of enrollment after May 1, 2012). A \$200.00 non-refundable deposit per camper must accompany your enrollment. If camp fees are not paid in full as per the above schedule of payment, all discounts will not adhere and enrollment may be cancelled with no refund made. In the event of delinquent payment, I agree to pay all costs incurred during the collection process, including legal fees.

Camp fees (not including the \$200 deposit) are refundable until May 1, 2012. Camps 'R' Us reserves the right to charge an administrative fee up to \$200 per camper in addition to the non-refundable deposit for costs incurred as a result of enrollment. After May 1, 2012, no refunds will be made for any reason including, but not limited to, camp closings, absences, changes, transportation delays, withdrawals or termination. If a camper is absent for documented medical reasons for more than 7 consecutive camp days, a refund will be made for each day missed after the seven-day deductible period; a physician's note must be submitted. There are no make up days for absences for any reason. Camp is closed July 4, 2012.

For the safety and general welfare of all campers, Camps 'R' Us, New York LLC reserves the unrestricted right, at its sole discretion, to terminate this enrollment agreement and dismiss a camper, whose conduct or influence, in the opinion of the Camps 'R' Us Administration, is inimical to the best interests of Camps 'R' Us, New York LLC. In the event of such termination, Camps 'R' Us, New York LLC is not obligated to refund camp fees or any unused amount of the camp fees.

Permission is hereby granted to Camps 'R' Us, New York LLC for my child to participate in all camp activities, and to take my child by bus and or walking on trips off campus as part of any Camps 'R' Us program. Permission is hereby granted for the camper to participate in water-related activities, including trips to the Nassau or Suffolk County Pool Facilities listed below, and water-related venues that are not inspected by the Nassau County Department of Health or Suffolk County Department of Health Services (i.e. Camelbeach Water Park, Splish Splash Water Park). I understand that the camp directors have selected venues and activities, which they have determined to be safe and suitable for campers, and that camp staff will verify the safety of each site at the time that the camp group visits. I understand that my child is responsible for his/her behavior at all times. If in the view of the trip leader conducting the trip, my child becomes involved in behavior that presents a danger to him/herself or other children, appropriate steps will be taken to protect all children.

Baldwin Campus - Wantagh Park Pool
Northport Campus - Dix Hills Park Pool

Bellmore Campus - Wantagh Park Pool
Valley Stream Campus - N. Woodmere Park Pool

Hicksville Campus - Cantiague Park Pool

I understand that Camps 'R' Us, New York LLC, its campuses or its employees will not be responsible for accidents and/or medical or dental expenses incurred as a result of participation in the camp program. Camps 'R' Us, New York LLC has permission to reproduce and publish any photographs, video or likeness of my child for advertising, commercial, or any lawful purpose.

In case of emergency: In the event that family, guardians, emergency contacts, or a family physician cannot be contacted in an emergency, Camps 'R' Us, New York LLC is granted permission to provide whatever medical attention is necessary and/or to take my child to the nearest available hospital's emergency room. I hereby give my consent to Camps 'R' Us, New York LLC to arrange for emergency medical/surgical/dental care and treatment (including diagnostic procedures) necessary to preserve the health of my child, and acknowledge that I am responsible for all charges associated with any such care and treatment rendered.

Camps 'R' Us, New York LLC is required to be permitted to operate by the Nassau County Department of Health and as such is required to be inspected twice yearly. Inspection reports are filed at the Nassau County Department of Health, Office of Recreational Facilities, 106 Charles Lindbergh Boulevard, Uniondale, NY 11553. Inquiries can be made Monday-Friday, 9:00 AM-4:45 PM at (516) 227-9717.

This enrollment agreement constitutes the full understanding of the parties hereto and no change, modification or waiver of any of the terms shall be effective unless in writing and signed by both parties. The person who accepts this contract represents that he/she has full authority to do so and will be responsible for payment of all camp fees. In the event that this enrollment agreement is executed by one parent/guardian, the executor acknowledges that he/she is also acting as agent of any other parent/guardian with authority to enroll the child at camp and to execute the enrollment agreement on his or her behalf. In addition, this executor has read and fully understands the information presented in the Camps 'R' Us Parent Guide, available at campsrus.org or by calling (516) 935-2267.

SUMMER 2012 SESSIONS

Week 1	June 25th - June 29th
Week 2*	July 2nd - July 6th
Week 3	July 9th - July 13th
Week 4	July 16th - July 20th
Week 5	July 23rd - July 27th
Week 6	July 30th - August 3rd
Week 7	August 6th - August 10th
Week 8	August 13th - August 17th

*Camp is closed on July 4th in observance of Independence Day.
Voyagers Trip & Travel program: June 25th-July 20th

SUMMER 2012 FEES*

TT/KK/12/34/56	C2 Program		
1 Week	\$500	1 Week	\$425
2 Weeks	\$950	2 Weeks	\$800
3 Weeks	\$1350	3 Weeks	\$1125
4 Weeks	\$1700	4 Weeks	\$1400
5 Weeks	\$1875	5 Weeks	\$1625
6 Weeks	\$2100	6 Weeks	\$1800
7 Weeks	\$2275	7 Weeks	\$1925
8 Weeks	\$2400	8 Weeks	\$2000

*Selecting a 3 day option will discount fees by 10%.
Voyagers Trip & Travel program: \$3300

ENROLLMENT INSTRUCTIONS

Complete and submit the 2012 Enrollment Form and Agreement with the \$200 Deposit to:

Camps 'R' Us
41 Heisser Lane
Farmingdale, New York 11735

Make all checks payable to Camps 'R' Us. Please include the camper name and campus in the memo. If paying by credit/debit card, please complete the Payment Authorization below.

I have read the Enrollment Agreement. I understand the terms and accept the conditions contained therein.

Parent/Guardian Name (please print) _____ Signature _____ Date _____

PAYMENT AUTHORIZATION (for credit/debit card transactions)



Card Number: _____

Cardholder Name _____ Exp. Date _____
(please print)

Billing Address: _____
Street City State ZIP

Amount to be charged: _____

The undersigned authorizes Camps 'R' Us, New York LLC to process credit card transactions from the stated cardholder. By signing this document, I am personally guaranteeing these transactions and will ensure full and proper payment. If my balance is not paid by May 1, 2012, I understand that Camps 'R' Us will charge the credit/debit card listed for the full amount of my account balance.

Name _____ Date _____
(please print)

Signature _____