



# Nursery - 4th Grade 2016 Enrollment Application

**Wednesday, June 29th - Tuesday, August 23rd**  
 Camp will be closed Monday, July 4th for Independence Day  
 Camp runs from 9am to 4pm.

**Up to 15% in Early Enrollment Incentives**  
 When enrolled with a deposit by September 30th, 2015

|  |  |
|--|--|
| Child's Name .....   | Gender <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Address .....  | Birthdate .....  |
| .....  | Grade Sept. '16 .....  |
| Home Phone .....   | School 2015-16 .....   |
| Parent's Name .....  | Parent's Name .....  |
| Parent's Work # .....  | Parent's Work # .....  |
| Parent's Cell # .....  | Parent's Cell # .....  |
| Parent's Email .....   | Parent's Email .....   |
| Child lives with: (Check all that apply) <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Step-Parent <input type="checkbox"/> Other: .....  |  |
| Please list any children your child would like to be grouped with: (Request must be mutual and cannot be guaranteed. Negative requests that impact another child's placement will not be honored. Final placement is determined by the Director) |  |
| .....  |  |
| How did you hear about North Shore? .....  |  |

## Terms of Agreement

- (1) TUITION INCLUDES ALL CAMP ACTIVITIES, A T-SHIRT, A DAILY LUNCH, TOTE BAG, ALL DAY TRIPS, TOWELS, AND STAFF GRATUITIES.
- (2) The required deposit shall be paid at time of registration and the full balance shall be paid by May 1st.
- (3) Tipping (gratuities) of any staff, in whatever manner or fashion, is prohibited.
- (4) Due to the seasonal nature of summer camping and the set limitation of spaces offered, no refund shall be provided for absences, changes withdrawals, or dismissal for cause.
- (5) For the safety and general welfare of all campers, the Camp reserves the unrestricted right to dismiss a camper whose conduct or influence, in the opinion of the director, is inimical to the best interests of the Camp.
- (6) Permission is hereby granted for videos & photographs to be taken of the camper and the Camp has the right to utilize these photographs in camp brochures, on our website and in promotional materials.
- (7) Permission is hereby granted to the Camp to take the child on trips outside of camp as part of the regular camp program.
- (8) This contract 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.
- (9) The venue of any dispute that may arise out of this Agreement or otherwise, to which North Shore Day Camp or its agents is a party, shall be Nassau County, New York. Any and all litigation must be brought only in and for courts in Nassau County, New York to the exclusion of litigation anywhere else in the world.

## Medical Permission Statement (Must be completed before your child can be admitted to camp)

I hereby give North Shore Day Camp permission to take my child to any hospital facility or outside doctor when deemed necessary. Furthermore, I hereby give permission to such hospital or outside doctor to authorize x-rays and emergency treatment if deemed necessary. I understand that all medical bills for service rendered by anyone other than the camp's medical staff are my responsibility.

I hereby give permission for my child to use the sunscreen s/he has brought or the camp has supplied, which is approved by the FDA for over the counter use to avoid overexposure to the sun. Our child may be assisted by unlicensed camp staff if I or s/he requests.

I have read the Terms Of Agreement and the Medical Permission Statement above and understand it's terms and accept it's conditions. In the event that this Agreement is executed by one parent, I acknowledge that I am also acting as the agent of the other parent with authority to so enroll my child at North Shore Day Camp and to execute this Agreement on his or her behalf. I recognize that the Camp relies upon the representations herein made in accepting this enrollment.

|                    |       |                      |       |
|--------------------|-------|----------------------|-------|
| _____              | _____ | _____                | _____ |
| Parent's Signature | Date  | Director's Signature | Date  |

Please enroll my child for the 2016 Season in the Program selected below:

**WEEKS** 1:(June 29 - July 5) 2:(July 6 - July 12) 3:(July 13 - July 19) 4:(July 20 - July 26) **Weeks run from**  
 5:(July 27 - Aug 2) 6:(Aug 3 - Aug 9) 7:(Aug 10 - Aug 16) 8:(Aug 17 - Aug 23) **Wednesday - Tuesday**

|   | <b>5% Early Enrollment Credit</b><br>(when enrolled by Sept 30th, 2015) | <b>Nursery-4 Tuition</b> | <b>Standard Tuition</b><br>with 5% Early Enrollment Credit | <b>Auto Pay Tuition</b><br>with 5% Early Enrollment & 5% Automatic Pay Credits | <b>Early Pay Tuition</b><br>with 5% Early Enrollment & 10% Early Payment Credits |
|---|---|--------------------------|--|--|--|
| <input type="checkbox"/> <b>8 Weeks</b> (6/29 - 8/23)                     |   | \$ 7,475                 | \$7,101  | \$6,728  | <b>\$6,354</b>   |
| <input type="checkbox"/> <b>7 Weeks</b> Circle: 1 2 3 4 5 6 7 8           |   | \$6,975                  | \$6,626  | \$6,278  | <b>\$5,929</b>   |
| <input type="checkbox"/> <b>6 Weeks</b> Circle: 1 2 3 4 5 6 7 8           |   | \$6,575                  | \$6,246  | \$5,918  | <b>\$5,589</b>   |
| <input type="checkbox"/> <b>5 Weeks</b> Circle: 1 2 3 4 5 6 7 8           |   | \$5,975                  | \$5,676  | \$5,378  | <b>\$5,079</b>   |
| <input type="checkbox"/> <b>4 Weeks*</b> (6/29 - 7/26)                    |   | \$4,975                  | \$4,726  | \$4,478  | <b>\$4,229</b>   |
| <input type="checkbox"/> <b>4 Weeks*</b> (7/27 - 8/23)                    |   | \$4,975                  | \$4,726  | \$4,478  | <b>\$4,229</b>   |
| <input type="checkbox"/> <b>3 Weeks*</b> (6/29 - 7/26)<br>Circle: 1 2 3 4 |   | \$4,275                  | \$4,061  | \$3,848  | <b>\$3,634</b>   |
| <input type="checkbox"/> <b>3 Weeks*</b> (7/27 - 8/23)<br>Circle: 5 6 7 8 |   | \$4,275                  | \$4,061  | \$3,848  | <b>\$3,634</b>   |

\*Choose any 3 or 4 weeks for a surcharge of 5%.  **Any 3 Weeks**  **Any 4 Weeks** Circle: 1 2 3 4 5 6 7 8

**ALL TIPS ARE INCLUDED: A SAVINGS OF MORE THAN \$350 PER CAMPER!**

Choose from the following Payment Options:

**\$2,000 deposit due on enrollment.**

- 5% Sibling Credit for 2nd & subsequent children
- 10% Nursery Credit for Mini Day Campers

**STANDARD** Payment. Balance paid in full by May 1st, 2016.

**AUTO** Payment (**5% Credit**). Enrolled by September 30th, 2015. Automatic charge/debit the 1st of each month (Oct - April), with final balance due on May 1st, 2016.

**EARLY** Payment (**10% Credit**). Balance paid in full by September 30th, 2015.

Choose a Payment Method:

|   |  |                      |
|---|--|----------------------|
| <input type="checkbox"/> <b>Check Enclosed</b>  | Check Number.....  | Payment Amount ..... |
| <input type="checkbox"/> <b>VISA</b> <input type="checkbox"/> <b>MasterCard</b> <input type="checkbox"/> <b>AMEX</b> <input type="checkbox"/> <b>Discover</b> | Payment Amount .....   |                      |
| Card Number .....   | Expiration Date .....  |                      |
| Cardholder's Name .....   | Billing Address .....  |                      |
| Cardholder's Signature .....  | City, State, Zip .....   |                      |
|   | <input type="checkbox"/> Charge this Credit Card for the monthly Auto Pay Billing Option   |                      |
| <input type="checkbox"/> <b>eCheck</b> <b>1% Tuition Credit for each eCheck Payment</b>   | Payment Amount .....   |                      |
| Account Number .....  | Account Type: <input type="checkbox"/> Savings <input type="checkbox"/> Checking           |                      |
| Routing Number .....  | Billing Address .....  |                      |
| Account Holder's Name .....   | City, State, Zip .....   |                      |
|   | <input type="checkbox"/> Debit this eCheck account for the monthly Auto Pay Billing Option |                      |

Extensions made after the first day of camp will be billed at 10% over the non-discounted rate. There are no refunds for absences, changes, withdrawal or terminations. Deposit is fully refundable through February 28th, 2016 (or 30 days after enrollment, whichever is later), less a \$350 Administrative Fee. The \$350 Administrative Fee is also fully refundable within 30 days of enrollment. All payments above deposit are fully refundable through May 31st, 2016.

North Shore Day Camp is permitted to operate by the Nassau County Department of Health and is required to be inspected twice yearly. The inspection reports are filed at 200 County Seat Drive, Mineola NY 11501. Inquiries can be made Monday - Friday from 9:00 AM - 4:45 PM.



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