

Friedberg JCC
 15 Neil Court
 Oceanside, NY 11572
 (516) 766-4341
 www.friedbergjcc.org



Staff
Initials

Camper Last Name _____ Address _____ Town/Zip _____ Telephone _____
 Parent/Guardian 1 Name _____ Phone _____ Cell _____ Bus. Phone _____
 Parent/Guardian 2 Name _____ Phone _____ Cell _____ Bus. Phone _____
 Parent's Marital Status: Single _____ Married _____ Divorced _____ Separated _____ Child Lives with: _____
 Parent/Guardian1 Email _____ Parent/Guardian2 Email _____
 Emergency Contact Name _____ Phone _____ Cell _____ Relationship _____
 Emergency Contact Name _____ Phone _____ Cell _____ Relationship _____
 Physician's Name _____ Phone _____

Camper's Name	M/F	Age on First Day of Camp '17	Grade in Sept. 2017	Birth Date	CAMP DIVISION NAME EC O'side, EC LB, EC Merrick, Kinderfun, Pioneer, Adventurer, Explorer, Voyager, CIT, Achieve, Theatre, Art	Full Summer or Dates & # of Weeks Attending	Fee

If possible, please group my child(ren) with (name of campers): _____

Member: Y__ N__ New Camper _____ Returning Camper _____ # of years at Camp Friedberg _____
 ___ Pre-school transportation available for an additional fee ___ EC O'side ___ EC LB ___ EC Merrick ___
 ___ Before and after care available for an additional fee ___ EC O'side ___ EC LB ___ EC Merrick ___
 (Forms available in their respective pre-schools & Camp offices.)
 ___ Early Morning drop-off available for an additional fee of \$210 for full summer from 7:00 a.m. at JCC Oceanside and 7:30 a.m. at JCC Long Beach - Services needed from _____ a.m.
 ___ After Care is available for an additional fee of \$250 for full summer until 6:00pm at JCC Oceanside and Long Beach

Total of camp fees _____
 Early morn/after care fee _____
 Bus Fee (where applicable) _____
 Discounts (2nd child/other) _____
 Total _____
 Deposit _____
 Balance due June 1st _____

**CHECKS PAYABLE TO:
 FRIEDBERG JCC RETURN ENTIRE
 FORM WITH YOUR PAYMENT**

**FORMS SHOULD BE MAILED TO
 FRIEDBERG JCC
 15 NEIL COURT
 OCEANSIDE, NY 11572
 OR EMAILED TO
LINNELAVENNE@FRIEDBERGJCC.ORG**

**TRANSPORTATION INFORMATION MUST BE COMPLETED
 CLOSEST CROSS STREET _____
 If pick up or drop off address is different than home address:**

I have read the registration and all other information in the current brochure and agree to accept the terms. I hereby give permission for my child(ren) to participate in all activities including trips away from the campsites. I understand that descriptions of programs are subject to change before &/or during the camp session without prior notice. I understand that the JCC may use photographs (still and video) of any persons listed on this application which may be taken in the course of the JCC programs for publicity purpose. Please note that withdrawals may be made up to June 1 only. No refunds can be given after that point.

Date: _____ Signature of Parent/Guardian _____ Print Name _____

Initial here for
an electronic approval _____



Friedberg JCC
15 Neil Court
Oceanside, NY 11572
Phone: 516-766-4341
Fax: 516-766-0513

CREDIT CARD AUTHORIZATION FORM FOR CAMP 2017

I authorize the Friedberg JCC to charge my _____ card,

Account #: _____

Security Code, 3 digits MC/Visa/ Discover _____

Security Code, 4 digits – AMEX _____

expiring on _____, in the amount of \$_____.

This charge is to serve as payment for _____.

Camper's Name(s)

Card Member's Signature

Date

Print Card Member's Name

Address

Town

State

Zip