



BH

Camp Gan Israel of Waukesha Wisconsin

A Jewish Child's Dream Come True!

1222 E Broadway Waukesha WI 53186 · (262) 563-9770 · CGI@JewishWaukesha.com · www.JewishWaukesha.com

CAMPER INFORMATION

Last Name		First & Middle Name		Name of preference	Date of Birth __ / __ / ____	Gender M / F
Home Address			Home Phone	Jewish Name	School*	Grade*
Fathers Name	Fathers Occupation	Fathers Cell Number	Fathers E-Mail			
Mothers Name	Mothers Occupation	Mothers Cell Number	Mothers E-Mail			
Emergency Contact #1: Name / Cell Phone				Emergency Contact #2: Name / Cell Phone		

*School/Grade Entering in September

DATES & RATES

\$225 per week

June 20 – 24

June 27 - July 1

OTHER FEES

\$25 Kosher lunch fee	<input type="checkbox"/> Paid Online	<input type="checkbox"/> Enclosed
\$10 T-Shirt* Fee:		<input type="checkbox"/> Enclosed
Extended Care - \$5/hour - 8am-5pm. (Attach a list with exact dates/times you will require extended care)	<input type="checkbox"/> Before Care	<input type="checkbox"/> After Care

*Required for all campers

PAYMENT

<input type="checkbox"/> I would like to pay by Check.	<input type="checkbox"/> Full Amount	<input type="checkbox"/> Head Checks
<input type="checkbox"/> I would like to pay by Credit Card	Card Type: <input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> AMEX <input type="checkbox"/> Disc.	
Card Number:	Expiration: __/__/__	CVV Code:
Name:	Address:	

*Please make checks payable to: Chabad of Waukesha

Yes! I would like to help another child go to Camp Gan Israel by donating: \$_____ to the Camp Gan Israel Scholarship Fund.



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TERMS AND CONDITIONS

- PARENTAL CONSENT:** I hereby give consent for my child to participate in all activities of Camp Gan Israel both on and off site, including trips, transportation to and from trips etc., unless I advise you otherwise in writing.
- PAYMENT AND CANCELLATION:** Full tuition (Minus any scholarship) is due by June 15th, 2015 and is non-refundable after that date.
- DISMISSAL OF CAMPER:** I fully understand and agree that Camp Gan Israel reserves the right to dismiss, in its sole discretion, any Camper whose condition, conduct, influence or behavior is deemed unsatisfactory or detrimental to the best interests of the Camp or his/her fellow campers or who violates camp rules and regulations. In the event of dismissal, tuition will be refunded on a pro-rated weekly basis.
- MEDICAL CARE:** In case of emergency, I hereby give permission to the physician selected by the camp director, to hospitalize, to secure proper treatment for and to order injection, anesthesia, or other procedure deemed necessary for my child by an MD. Every effort will be made to contact the Parent / Legal Guardian and emergency contacts first. Should it be necessary for the wellbeing of the camper to utilize outside medical or dental services, all expenses involved will be paid for by the parent. To the best of my knowledge, my child is in good health and I will notify the camp if he/she is exposed to any infectious diseases. I understand that my child may be dismissed during a camp day, due to illness, at the discretion of the camp, and I agree to abide by the Director's decision.
- IMAGES, ETC.:** Permission is hereby given to use in promoting the Camp and in other ventures directly relating to the Camp (I) digital, photographic and video images or likenesses of camper; audio of camper; and (II) statements, articles, names, music, art, photographs, audio recordings, films and videos created by camper or originating from Camp or from a Camp-related activity.
- INDEMNIFY & HOLD HARMLESS:** I further release and agree to indemnify and hold harmless Camp Gan Israel (CGI) and its officers, servants, or assigns from any liability concerning our child's involvement in CGI and further agree that the use of any premises during the CGI camp day is made at the risk of the registrant.

Signature: _____ Date: ___ / ___ / _____