



# Driftwood DAY CAMP 2017 ENROLLMENT

DISCOUNTED TUITION RATES VALID UNTIL 6/30/17. TUITION WILL INCREASE AS OF 7/1/2017.

CAMPER'S NAME	GENDER	FATHER'S NAME
HOME ADDRESS	WORK PHONE	
TOWN	ZIPCODE	CELL PHONE
HOME PHONE NUMBER	EMAIL ADDRESS	
DATE OF BIRTH (mm/dd/yy)	AGE AS OF 6/17	GRADE AS OF 9/17
EMERGENCY CONTACT NAME (other than parent)		RELATIONSHIP
EMERGENCY PHONE		MOTHER'S NAME
<input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Work		WORK PHONE
		CELL PHONE
		EMAIL ADDRESS

**Circle Rate and Check Boxes Below As Needed**

	PROGRAM Grade as of September 2017	8 Weeks <input type="checkbox"/>	6 Weeks CIRCLE 6 OF 8								4 Weeks	
			1	2	3	4	5	6	7	8	FIRST 4 <input type="checkbox"/>	SECOND 4 <input type="checkbox"/>
<input type="checkbox"/>	Grades Pre-K, K	\$6595									\$5795	\$4595
<input type="checkbox"/>	Grades 1, 2, 3, 4, 5	\$6895									\$6095	\$4995
<input type="checkbox"/>	Grades 6, 7 – Pre-Teen Travel	\$7395									\$6545*	\$5595
<input type="checkbox"/>	Grades 8, 9 – Teen Travel	\$8495									\$7495*	\$6395
<input type="checkbox"/>	Junior Counselor: Age 15 by 6/16	\$3095									Not Available	Not Available
<input type="checkbox"/>	Mini Week: (Pre-K & K) CIRCLE 3 MON TUE WED THU FRI	\$5495									\$5095	\$4395
<input type="checkbox"/>	Mini Week: (Grades 1 - 5) CIRCLE 3 MON TUE WED THU FRI	\$5795									\$5395	\$4695

Extensions made after the first day of camp will be billed at the prevailing rate at the time of extension. \*Rate may vary depending on chosen weeks.

**Tuition includes transportation, all activities, lunch, one camp shirt, camp bag, snacks, and towel service.**  
DISCOUNTED RATES EXPIRE 6/30/17. PAYMENT RECEIVED AFTER 6/30/17 WILL BE BILLED AT POSTED RATES AT THAT TIME.

<b>FOR OFFICE USE ONLY</b>	
DATE:	DATE:
DEPOSIT AMT:	PAYMENT AMT:
NOTES:	

**CAMP SESSION:**  
June 26 - August 18, Monday-Friday  
Camp will be closed Tuesday, July 4th.  
Camp dates may be subject to change.  
**REFUNDABLE DEPOSIT: \$795.00**

Please indicate preference for one MUTUAL grouping placement: \_\_\_\_\_  
Final placement is made at the discretion of the directors. We will try to honor your positive requests.

Please indicate what school the camper will attend September 2017: \_\_\_\_\_

Please indicate the number of summers the camper has attended Driftwood Day Camp: \_\_\_\_\_

If a new camper, please indicate what camp your child went to previously: \_\_\_\_\_

**TERMS OF AGREEMENT:**

- 1. A DEPOSIT OF \$795 IS REQUIRED FOR REGISTRATION
- 2. PAYMENT IN FULL IS DUE BY MAY 15 OF THE CAMP SESSION YEAR.
- 3. THE CAMP RESERVES THE RIGHT TO DISMISS ANY CAMPER WHOSE BEHAVIOR REPRESENTS A DANGER TO THE CAMP OR CAMPERS.
- 4. PERMISSION IS GRANTED TO TAKE AND USE PHOTOGRAPHS FOR OUR WEBSITE OR FOR PUBLICITY PURPOSES.
- 5. PERMISSION IS GRANTED FOR ANY DAY TRIPS THAT ARE PART OF THE CAMP PROGRAM.
- 6. IN THE EVENT PARENTS CANNOT BE CONTACTED PERMISSION IS GRANTED FOR APPROPRIATE MEDICAL CARE AT A HOSPITAL.
- 7. ACTS OF GOD, STRIKES, AND CIRCUMSTANCES BEYOND OUR CONTROL THAT CAUSE THE CANCELLATION OF CAMP DAYS ARE NONREFUNDABLE AND CANNOT BE REPLACED. DAYS MISSED DUE TO ILLNESS, VACATION OR ABSENCE MAY NOT BE CHANGED OR SUBSTITUTED.

After May 15, 2017 open balances will result in tuition adjustment for the current rate at that time. Overdue balances after May 15, 2017 will be assessed at 1-1/2 % per month late fee on the unpaid portion unless prior arrangements have been made with the office. A \$100 processing fee will be deducted for withdrawals. In the event that your child loses more than 7 consecutive camp days because of medical reasons, a tuition refund will be made for each day lost AFTER the 7-day deductible period. A physician's note is required in order to receive the medical tuition refund. **There will be no refund for any other reason.**

I agree that any dispute concerning, relating, arising out of or referring to the subject matter of this contract shall be resolved exclusively by binding arbitration in Nassau County, New York, according to the then existing commercial rules of the American Arbitration Association and the substantive laws of that state. The arbitrator and not any federal, state or local court or agency shall have exclusive authority to resolve any dispute relating to the interpretation, applicability, enforceability, conscionability, or formation of this contract, including but not limited to any claim that all or any part of this contract is void or violable.

**I have read the enrollment agreement and understand its terms and accept all conditions.**

Signature: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_ Print Name: \_\_\_\_\_

**PAYMENT METHOD** (Make checks payable to Driftwood Day Camp)  Check Enclosed  Visa  Mastercard  Amex

Interested in a monthly payment plan? Check Here

Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CID \_\_\_\_\_

Card Holder's Name \_\_\_\_\_ Signature: \_\_\_\_\_

Billing Address \_\_\_\_\_

Same as address on first page

Complete and return this entire form to:  
**Driftwood Day Camp, 331 Mt. Misery Rd., Melville, NY 11747 • 631-692-6990 • Fax: 631-692-4140 • driftwooddaycamp@gmail.com**

**Transportation Information:**

Name Streets and Indicate House with 'X'.

**CAMPERS NAME:**

**ADDRESS:**

**TOWN:**

**NEAREST MAJOR ROADS ARE:**




**ADDL COMMENTS:** \_\_\_\_\_