Dear Parents,

It gives us great pleasure to inform you that registration for Bais Rivkah Day Camp 5773 is open. We look forward to providing your daughter with an amazing summer experience!

**Dates of Camp:**
- **Grades 1-7**: Monday, July 1 (23 Tammuz) – Thursday, August 15 (9 Elul)
- **Kiddie Camp (Pre 1-A & Head Start)**: Tuesday, July 2 (24 Tammuz) – Tuesday, August 13 (7 Elul)

**Day Camp Fees:**
- **Grades 1-7**: $1,200 Full Summer. $175 Per Week (T Shirt fee not included)
- **Kiddie/Pre 1-A**: $1,050 Full Summer $175 Per Week (T Shirt fee not included)

**Day Camp Registration for all divisions (including Kiddie Camp) is located at:**
Bais Rivkah - 310 Crown St. – 3rd Floor

**Registration hours:** Monday thru Thursday from 10:00 am to 3:30 pm. If you are unable to come during this time, call 718-735-0400 Ext: 1122, or email us for an appointment

Please complete and return the following:

1. **Registration Contract - one per family**
   - Include family information, the name of each child that you are registering.
   - Check off which weeks each camper will be attending, and complete payment information.
   - **A $200 Deposit per child must be included with your Registration Contract.**
   - **Full Payment** must be made prior to start of camp - credit cards & post dated checks are accepted

2. **Day Camper Information Form – one per camper**

3. **Health Form – one per camper**
   - By order of the Board of Health, only campers who have submitted a current health form including immunizations and signed by your Doctor will be allowed into camp.

4. **NEW - Lunch Form – one per family**
   - Completed forms and payment must be submitted no later than Thursday, June 6, 2013
     - **Late registration will be processed based on availability.**
   - Admission cards will be mailed only to those campers who have submitted all paperwork (including medical form) and are paid in full.
   - Only campers that are registered for a specific week will be admitted that week.
   - We must be notified a week in advance if plans change in order for you not to be charged.

We wish you and your family a healthy, enjoyable and safe summer.

Mrs. Y. Baitelman
Day Camp Registration Office

Mrs. Z. Gurevitz
Day Camp Registration Office
REGISTRATION CONTRACT for Day Camp 2013

Last Name: _________________________________ Home Phone#:_____________________________________
Address:________________________________________ City:__________________ State:______ Zip:________
Local Address ___________________________________Local Phone#________________________________
Father’s Full Name:____________________ Email Address____________________ Cell:____________________
Mother’s Full Name:___________________ Email Address____________________ Cell:____________________
Emergency Contact:___________________ Relationship to camper:________________ Phone #:_________________

Please complete the chart below for each child that you are registering for day camp.
If not attending full summer, check off which weeks camper will be attending.

<table>
<thead>
<tr>
<th>Camper’s Name</th>
<th>Grade 2012/13</th>
<th>Date of Birth</th>
<th>Full Summer</th>
<th>Pre School, Pre 1a and Grade 1-7</th>
<th>FEES $175 per week</th>
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<td>Week of 7/1</td>
<td>Week of 7/8</td>
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Method of Payment– Check one:
1.□ Credit Card: I __________________hereby authorize Beth Rivkah Day Camp to withdraw from my Credit Card the total of $________:  
   Date:_____ Amount $_______ Date:_____ Amount $_______ Date:_____ Amount $_______ Date:_____ Amount $_______
   Date:_____ Amount $_______ Date:_____ Amount $_______ Date:_____ Amount $_______ Date:_____ Amount $_______
   Name on Credit Card:______________________________________ Card Number:________________________________ Expiration Date:_______
   Billing address of Credit Card including zip code (if different than home address)________________________________________
2.□ Check: Total enclosed $______ Checks #s and amounts:___________________________________________________________
3.□ Cash: Total enclosed $_______

Contract: I agree to the following terms and conditions: A $200 deposit per child is required upon signing this contract. Full payment is required prior to admission to camp. I understand that day campers must be registered for each week they plan to attend. I understand that if my plans change Day Camp must be notified one week in advance of change of plans in order for me not to be charged.

PARENT INFORMATION STATEMENT: BETH RIVKAH DAY CAMP, 310 CROWN STREET, BROOKLYN, NY 11225
   This camp is licensed by the NYC Department of Health and Mental Hygiene and is inspected twice yearly.
   The inspection reports are filed at the Bureau of Food Safety and Community Sanitation

Parent Signature:______________________________ Date:______________________________