



Hillel Day School "Vacation Camp"

The following are a list of dates when camp will be in session:

Check Dates

- | | | |
|---|--|-------------------------------|
| <input type="checkbox"/> Erev Rosh Hashanah | Sept 28 th | 8:15am-3:00pm |
| <input type="checkbox"/> Sukkot Break | Oct 12 th | 8:15am-3:00pm |
| <input type="checkbox"/> Sukkot Break | Oct 17 th -18 th | 8:15am-4:30pm |
| <input type="checkbox"/> Sukkot Break | Oct 19 th | 8:15am-3:00pm |
| <input type="checkbox"/> December Winter Break | Dec 26 th -Dec 30 th | 8:15am-4:30pm(Fri 8:15am-3pm) |
| <input type="checkbox"/> January Winter Break | Jan 23 rd -27 th | 8:15am-4:30pm(Fri 8:15am-3pm) |
| <input type="checkbox"/> End of Year Camp – Wk1 | Jun 11 th – 15 th | 8:15am-4:30pm(Fri 8:15am-3pm) |
| <input type="checkbox"/> End of Year Camp – Wk2 | Jun 18 th – 22 nd | 8:15am-4:30pm(Fri 8:15am-3pm) |

Total Days _____

- Camp is for students in EC2-5th Grade
- Sports, Arts & Crafts, Field Trips (K – 5th Grade only) and more
- Bring a bag lunch and drinks (morning snack will be provided)
- Friday pizza lunch will be provided (send in snacks only)
- All camp dates are dependent on enrollment

Hillel Day School Vacation Camp Pricing	
Hillel Day School Families	Non-Hillel Day School Families
\$25 per child/per ½ day (M-F 8:15-12:30)	\$30 per child/per ½ day (M-F 8:15-12:30)
\$100 per child/per week (1/2 time only)	\$120 per child/per week (1/2 time only)
\$50 per child/per day	\$55 per child/per day
\$100 per family/per day	\$110 per family/per day
\$175 per child/per week (\$75 savings)	\$195 per child/per week
\$475 per family/per week	\$525 per family/per week

All camp dates are dependent on enrollment

For more information contact Chayim Dimont or Jill Kaminetzky at 470-5000

Student Name 1 _____ Student Name 2 _____

Student Name 3 _____ Student Name 4 _____

Parent Signature _____ Date _____

Medical Release and Liability Waiver

The patient and others whose signatures are attached below do hereby consent to any and all medical and surgical treatments including anesthesia and operations which may be deemed advisable by his or her physicians and surgeons. The intention hereof being to grant authority to administer and to perform all and singularly any examinations, treatments, anesthetics, operations and diagnostic procedures which may now or during the course of the patient's care be deemed advisable or necessary. We also agree that the patient, when admitted is to remain in the hospital until his or her physician recommends discharge.

I/We, the parents of the above named child, hereby give my/our approval to participate in any and all school activities, including transportation to and from the activities.

I/We know that participation in youth athletic activities may result in serious injury and protective equipment does not prevent all injuries to players/participants, and do hereby waive, release, absolve, indemnify and agree to hold harmless The Hillel Day School, the organizers, sponsors, supervisors, participants and persons transporting my/our child to and from activities for any claim arising out of any injury to my/our child whether the result of negligence or for any other cause, except to the extent and in the amount covered by accident or liability insurance.

In witness of my/our consent and agreement to the matters stated in the three preceding paragraphs, I/we have subscribed my/our signature(s) below.

Parent: _____ Witness: _____ Date: _____

Non Hillel families must fill out reverse side as well

Disclaimer: Although children need not be Hillel Day School students to register for camp, the administration of Hillel Day School reserves the right to make all decisions regarding admission to camp.

We must have a copy of your child's
blue and yellow health forms
BEFORE CAMP BEGINS

Mother Name _____ Father Name _____

Home Phone # _____ Mom Work # _____ Mom Cell # _____

Dad Work # _____ Dad Cell # _____

Address _____ City _____ Zip _____

Allergies _____

Medical Conditions _____

Emergency Contact Person (other than parent) _____

Emergency Contact Phone # _____