



2018

Purchase Day Camp Enrollment Application

2018



Camper's Name: _____ Birth Date: ____/____/____ Age (as of July 1, 2018): _____
(Last) (First) Month Day Year

Address: _____ Home Phone: _____
(Street) (City) (State) (Zip)

Gender: Boy Girl Grade 2018-19: _____ School 2018-19: _____ Is Your Child Toilet Trained? (Pre-School Only) Yes No

Special Placement Requests: Camper/Friend: _____ Grade Level (if different from above): _____

Allergies, Medical Conditions, or Special Needs if any: _____

Choose your program and number of weeks!

Camp runs for 8 weeks from Monday June 25th to Friday August 17th

	Full Day	Mini Day	Half Day
Hours	9am - 4pm	9am-1:45pm & 2pm	9am - 12:10pm
Camper Eligibility	All Campers Eligible	Entering Kindergarten & Younger	Pre-K Only - 3 by September 1 st
	Fee includes Lunch PLUS Bus* or Extended Hours, Towel Service, Camp Bag & Shirt	Fee includes Lunch PLUS AM Bus* or AM Extended Hours, Towel Service, Camp Bag & Shirt	Fee includes AM Bus* or AM Extended Hours, Towel Service, Camp Bag & Shirt
8 Weeks	<input type="checkbox"/> \$8200	<input type="checkbox"/> \$6450	<input type="checkbox"/> \$4500
7 Weeks	<input type="checkbox"/> \$7800	<input type="checkbox"/> \$6150	<input type="checkbox"/> \$4300
6 Weeks	<input type="checkbox"/> \$7300	<input type="checkbox"/> \$5750	<input type="checkbox"/> \$4000
5 Weeks	<input type="checkbox"/> \$6700	<input type="checkbox"/> \$5250	<input type="checkbox"/> \$3600
4 Weeks	<input type="checkbox"/> \$6000	<input type="checkbox"/> \$4650	<input type="checkbox"/> \$3100
3 Weeks	<input type="checkbox"/> \$5200	<input type="checkbox"/> \$3950	<input type="checkbox"/> \$2500
2 Weeks	<input type="checkbox"/> \$4300	<input type="checkbox"/> \$3150	<input type="checkbox"/> \$1800

Choose Which Weeks You Want - Check Each Week Requested

<input type="checkbox"/> Week 1: June 25- June 29	<input type="checkbox"/> Week 2: July 2 - 6 Camp Closed July 4 th	<input type="checkbox"/> Week 3: July 9 - 13	<input type="checkbox"/> Week 4: July 16 - 20	<input type="checkbox"/> Week 5: July 23 - July 27	<input type="checkbox"/> Week 6: July 30 - August 3	<input type="checkbox"/> Week 7: August 6 - 10	<input type="checkbox"/> Week 8: August 13 - 17
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Customize Your Options!

	Full Day	Mini Day	Half Day
Bus or Extended Hours Service Options * Please see transportation areas on reverse side. Deductions apply for: AM Service or PM service or Both	AM Service (Choose One) <input type="checkbox"/> AM Bus* <input type="checkbox"/> AM Extended Hours (7:45 Drop Off) <input type="checkbox"/> AM Bus & Extended Hours Declined Deduct \$250 For No AM Service	AM Service (Choose One) <input type="checkbox"/> AM Bus* <input type="checkbox"/> AM Extended Hours (7:45 Drop Off) <input type="checkbox"/> AM Bus & Extended Hours Declined Deduct \$250 For No AM Service	AM Service (Choose One) <input type="checkbox"/> AM Bus* <input type="checkbox"/> AM Extended Hours (7:45 Drop Off) <input type="checkbox"/> AM Bus & Extended Hours Declined Deduct \$250 For No AM Service
	PM Service (Choose One) <input type="checkbox"/> PM Bus* <input type="checkbox"/> PM Extended Hours (5:30 Pick Up) <input type="checkbox"/> PM Bus & Extended Hours Declined Deduct \$250 For No PM Service	Mid-Day Service Available in Purchase, West Harrison and Rye Brook Only. <input type="checkbox"/> Optional Mid-Day Bus Requested ADD \$250 For Mid-Day Service	Mid-Day Service Not Available
Lunch (Included for Full & Mini)	Lunch Plan Declined <input type="checkbox"/> Deduct \$250	Lunch Plan Declined <input type="checkbox"/> Deduct \$250	Lunch is not part of the Half Day Program

Discounts - Check All That Apply

Sibling After First Child <input type="checkbox"/> Deduct \$500	PCH After School Full Year Member <input type="checkbox"/> Deduct \$500	Camper entering 9th Grade <input type="checkbox"/> Deduct \$1000	Camper entering 10th Grade <input type="checkbox"/> Deduct \$2000
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Mother or Guardian Name: _____ Home Phone (if different from camper): _____
(Last) (First)

Address (if different from camper): _____ Business Phone: _____

Cell Phone: _____ Email Address: _____

Father or Guardian Name: _____ Home Phone (if different from camper): _____
(Last) (First)

Address (if different from camper): _____ Business Phone: _____

Cell Phone: _____ Email Address: _____

Please read and sign our Enrollment Policies on the reverse side.



2018 Enrollment Policies



REGISTRATION: Campers must be 3 years of age by September 1st, 2018 and toilet trained prior to camp's starting date. Half-day and Mini Day programs are available to pre-schoolers and children entering Kindergarten in the Fall of 2018. Special placement requests MUST be submitted on the application. Every effort will be made to honor at least one placement request.

Enrollment space is based on the number of groups provided per grade level. Applications will be processed in the order received and enrollment cannot be guaranteed. Campers must enroll for a minimum of 2 weeks. Additional week extensions must begin on a Monday. Partial weeks not permitted. Requests for extensions must be submitted by noon on the preceding Friday. Availability for additions or extensions is not guaranteed. Attendance at special programs requires enrollment during the week of the event.

PAYMENT: A deposit check of \$1,000 per child is to accompany each camp application. Checks or Credit Card Authorization Forms are acceptable. Parent must submit valid credit card information that authorizes Purchase Day Camp to charge their card for balances due. A second payment of \$1,000 per child is due on or before February 1st. The balance of camp fees and charges is due on or before April 1st. Payment is the responsibility of the person signing the application and bills will be sent to his/her attention. Applications received after April 15th will be assessed a \$250 fee.

TRANSPORTATION: Bus Transportation is guaranteed in the following areas: Purchase, West Harrison, Harrison, Rye Brook, Port Chester, Rye and White Plains. Bus Transportation requests from other towns should contact the office for availability. If Bus Transportation is not available, all deposits will be refunded. Optional Mid-Day Bus Transportation is available in Purchase, West Harrison and Rye Brook only for an additional fee of \$250. Bus transportation is not provided at the 12:10 dismissal.

REDUCTION AND CANCELLATION: On or before February 1st, 100% refund for canceled applications. Between February 2nd and April 1st, all applications canceled result in a forfeit of the deposit and the second payment; a total of \$2000. After April 2nd, all applications canceled result in a forfeit of full camp payment.

Between February 2nd & April 1st, any reduction in the original enrollment will be assessed a \$100/child/week administrative fee. On or after April 2nd, full payment is required for cancellations or reductions in enrollment weeks from the camp or transportation programs. No refunds or adjustments on paid or unpaid balances will be permitted. Enrollments are non-transferable. No fee or program adjustments will be granted for camper absences.

GENERAL: The Camp will release children to either parent or persons authorized by same on site at any time during the day if parental arrangements for pick up have been made beforehand with the camp office. All visitors must sign in at the office.

Medical forms complete with records of up to date immunizations must be completed with doctor's and parent's signature by May 1st. Due to Health Department regulations, failure to comply will affect enrollment status. Medical reimbursement accident insurance is included in the Base Fee. I give my child permission to carry and use sunscreen during the camp season.

I understand that the Camp will make my email, phone number and mailing address available to the camp population for car pool and play date purposes unless directed otherwise in writing. The camp is given irrevocable permission and authorization to use the child's photograph, portrait or image in connection with the camp's brochure, web site, video or any other means of promotion or advertising.

Purchase Day Camp reserves the right to refuse the enrollment of any child or to cancel this enrollment agreement at any time based on its sole and exclusive determination that the child's physical, mental, or emotional condition, would prevent that child from participating safely and satisfactorily in the programs offered; would prevent the child from interacting positively with other campers or TEAM Members; or would negatively impact on Purchase Day Camp's ability to offer its fundamental services. The Camp can initiate the cancellation of this agreement and the dismissal of the child if, during the camp season, the child or his/her agents exhibits unacceptable behavior which prevents our TEAM Members from safely supervising him/her or proves detrimental to himself/herself, other campers or TEAM Members as determined by the Camp Director.

The Purchase Day Camp is required to obtain a permit to operate from the New York Department of State. The Camp is also required to be inspected twice each year by the permit issuing authority. Information concerning these inspections is filed with the Westchester County Department of Health, Bureau of Public Health Protection, 25 Moore Avenue, Mt. Kisco, NY, 10549.

I enroll my child for the 2018 camp season and agree to the Release accompanying this application and the policies as stated herein.

_____ Signature of Parent or Guardian	_____ Print Name of Parent or Guardian	_____ Camper Name	_____ Date
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Office Use Only

2018



2018

RELEASE
(Complete One Per Family)

In consideration of participating in the activities at the Purchase Community, Inc. (DBA Purchase Community House or Purchase Day Camp and herein referred to as "PCH") and to use the equipment and facilities, the undersigned adult participant or parent or guardian in the case of a minor, agrees and acknowledges the following:

1. I hereby acknowledge and accept that the activities and use of some of the equipment at the PCH may involve inherent risks and could result in injury. I know the nature of the activities that my child is participating in and believe that my child is qualified to participate in the activities. I expressly state that my child is in good health and has no limitations that would preclude my child's safe use of the equipment and facilities of the PCH. I acknowledge that if I deem the facilities and the equipment of the PCH to be unsafe I will not have my child participate in the related activity.
2. I hereby release, indemnify and discharge the PCH, its employees, volunteers, directors, affiliates, agents and successors and assigns, from any and all liabilities, suits, claims, and damages (including attorneys' fees) incurred by me or my child arising out of the use or intended use of the PCH, its equipment or its facilities, including, without limitation, all claims for property damage, personal injuries or wrongful death, other than as a result of gross negligence, or intentional misconduct of the PCH.
3. I understand that the PCH and its personnel have the right to deny access to its facilities to any individual permanently or for a specified period of time, for any breach of any of the rules and regulations of the PCH and for any conduct that is viewed as unsafe or inappropriate.
4. I expressly state that I have read this document and I understand all of its provisions and that I fully acknowledge the nature and extent of the activities conducted at the PCH and the use of the facilities.
5. I hereby voluntarily assume those risks and understand that I will be solely responsible for injury, loss, damage or death to my child while my child is using the facility and participating in the activities therein.
6. I hereby give permission and authorization to the Purchase Community, Inc. to use my child's photograph, portrait or image in connection with the Purchase Community Inc, brochures, websites, video or any other means of promotion or advertising.
7. I hereby affirm that I am the participant or parent or legal guardian of the child stated below.

Child's Name (PLEASE PRINT FIRST & LAST)

Child's Name (PLEASE PRINT FIRST & LAST)

Child's Name (PLEASE PRINT FIRST & LAST)

Child's Name (PLEASE PRINT FIRST & LAST)

Child's Name (PLEASE PRINT FIRST & LAST)

Child's Name (PLEASE PRINT FIRST & LAST)

PRINT Name of Parent or Guardian

Signature of Parent or Guardian

DATE: mm/dd/year





Credit Card Payment Authorization

I authorize The Purchase Community, Inc. (DBA - Purchase Day Camp or Purchase Community House) to charge my credit card listed below for any payments not received by the applicable deadline.

Payments may be made by check, cash or credit card. Even if you plan to pay by check or cash, we require a credit card on file. Your credit card will not be charged if payments are made by the applicable due dates. Any balance remaining after each deadline will be charged to your credit card. Any enrollment extensions or program additions will automatically be charged to your card.


The following information is required

Family Last Name: _____

Participant's Name(s) 1. _____ 2. _____
3. _____ 4. _____

Billing Name (as it appears on the credit card): _____

Address (associated with the card): _____

<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
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Credit Card Number: _____

Expiration Date: ____/____

***I understand that my credit card will automatically be charged if payments are not made by check or cash by the above due dates. **Initial Here**  _____

Sign Here  _____

Date: _____