BIG CHIEF DAY CAMP – 2025

EARLYBIRD-DUE BY NOV. 1ST (RETURNING CAMPERS ONLY)

2427 North Jerusalem Road, East Meadow, NY 11554 (516) 781-3900

Camper's Name				Male Female					
Comp	olete Address		Town			Zip			
Telephone		Birth	Date	Age o	n 7/25	G	rade in 9/25	1	
E-ma	il address (require	d for Billing):							
			Telephone		?		_ Town		_
		Employer		Work # Cell _		Cell	II		
Father									
What made you select our camp									
	our child ever bee								
			CAL	L FOR INFAN	IT CAMP PRIC	CES			
				Tuition S					
		•		FANT - 13 ye. INFANT — 1 st			am - 4:00 pm m - 3:00 nm		
	Circle Your Choice:	18m. – 1 st		18m. – 1 st			2 nd gr. – 13		Circle
		grade	years old		years old	1 st grade	years old		Session
		8 Weeks	8 Weeks	6 Weeks	6 Weeks	4 Weeks	4 Weeks		6/30-8/22 Full
	5 Full	\$4390	\$4975	\$4050	\$4575	\$2775	\$3025		Session 1
	3 Full	\$3750	\$4075	\$3175	\$3575	\$2200	\$2400		6/30-7/25
	5 Midi	\$3380		\$2800		\$2100			
	3 Midi	\$2325		\$2200		\$1500			Session 2
	2 Midi	\$1680		\$1580		\$1000			7/28-8/22
	TRANSPO	ORTATION SEE	BACK OF FO	RM FOR DET	TAILS /LUNCH	I IS INCLUD	ED/CLOSED F	RIDAY 7/4	<mark>I</mark>
April 1st If you 30th w All tui RAINY	\$500 for e ds: Except for reductions refuses to MADE TO you decide out of or r County, Ne substantiv nt plan, tuition is paid in " - \$300 and May 1st - th change your child's se vill be charged a \$50 tions must be paid by DAYS:THERE ARE 2 DAY	ach child. (\$400 the \$500 regist of the \$500 registering to the \$500 regis	O.00 goes tow ration fee for will be given attends only cook attends only cook attends only cook and the subject mattern got to the there atte. Is: January 1st on. NOTE: There in effect at the y will be subject to the subject attends on the subject at	eards tuition are each child, all for any reason one day, you won). There are ere is NO cred or of this contrant existing comments are NO paymat time will be act to the new	ve and on the land \$100.00 is y deposits are reduced. If a child (the ill be charged in NO make-up of the land the charged rules of the charged! Any rate.	your registra efundable ur ree years old for two weel days or swite t is agreed the olved exclusi f the Americ ch 1st - \$300, e early bird en r changes m	ntion fee.) ntil April 1st. Ai or younger) is ks of camp. (NC ching of days fo hat any dispute vely by binding an Arbitration.	fter this tim not adjusti D EXCEPTIO or camp. If e concerning g arbitration Association	ne no refunds, ing to camp, DNS WILL BE camp is open and g, relating, arising n in Nassau n and the
Paren	t's Signature:				Date	Dep	osit		

Our camp is licensed by the N.C. Department of Health. We are inspected before camp starts and at least once during the camping season. These records are available upon request, at the N. C. Department of Health,200 County Seat Drive, Mineola NY as a licensed day camp, it is mandatory that each child be properly registered and that the camp has a current medical form on file **before camp starts**.

TRANSPORTATION

	TRANSPORT	ATION									
There is a fee for transp	ortation. Seats are limited. First	come first serv	e basis. The fees will	be as follows:							
	Check the box if you woul	d like to be p	ut on the list.								
 □ Both ways- 1st child \$ 500.00, family of 2, \$550.00, family of 3 \$600.00 □ One way- 1st child \$ 400.00, family of 2 \$475.00, family of 3 \$ 500.00 											
	Drop off & pi	ick up									
<u>Midi Day</u> :	Drop off is at 10:30 am		Pick up is at 3:00 p	m							
<u>Full Day</u> :	Drop off is at 9:00 am		Pick up is at 4:00 p	m							
Extended hours are availab	le upon request for full day cam	pers only. This	is a flat rate for any r	umber of weeks							
	<mark>chosen</mark> .										
:											
Name of pers	son who will be picking your child	up from camp:	(Must show photo I	D.)							
	Telephone	Relatio	onship								
	Personal Infor	mation:									
Full (day Campers/ 2 swims daily M	idi Day Campe	rs/ 1 swim daily								
What activities do you think y	our child will enjoy most?										
What are your child's eating h	nabits? Good	Fair	Poor								
Any food allergies? Ex	xplain										
Does your child have any othe	er allergies? Explain										
	Permission	Slip:									
Medical Emergencies: If you	cannot be reached: contact name	1									
Relationship to child	Telephone _		·								

Parent's SignatureDate
Name Phone Relationship
Name Phone Relationship
Release: I give the following two people permission to pick up my child from camp:
Sunscreen: I give Big Chief Camp permission to help my child apply sunscreen to themselves.
<u>Pictures</u> : Permission is hereby granted for photographs and/or videos to be taken of my child at The Big Chief Camp Big Chief has the right to utilize these pictures &/or videos in camp brochures & ads.