***1-2025***

***BIG CHIEF DAY CAMP 2025– HALF DAY CAMPERS***

*2427 N. Jerusalem Rd, E Meadow, NY 11554 781-3900*

Camper’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Male \_\_\_\_\_\_ Female \_\_\_\_\_\_\_\_\_

Complete Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone \_\_\_\_\_\_\_\_\_\_\_\_ Birth Date \_\_\_\_\_\_\_\_\_ Age on 7/25\_\_\_\_\_\_\_ Grade in 9/25\_\_\_\_

Doctor’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Town \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mother \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_ Work # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Father \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Employer \_\_\_\_\_\_\_\_\_\_ Work # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Cell# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EMAIL ADDRESS\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

What made you select our camp? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_T-shirt size \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Has your child ever been to camp before? \_\_\_\_\_ Where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tuition Schedule:

Half day prices are for children **TODDLER (18M) to 1st GRADE**. Hours are 9:00am – 1:00pm

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Circle Your Choice:** | Toddler – 1st grade9AM -1PM | **No Extended Hours** | Toddler –1st grade9AM – 1PM | **No Extended** **Hours** | Toddler 1st grade 9am -1pm |  | **Circle****Session**Full |
|  | 8 Weeks |  | 6 Weeks |  | 4 Weeks |  | 6/30-8/22 |
| 5 ½ DAYS  | **$3000** |  | **$2307** |  | **$1538** |  | Session 16/30-7/25 |
| 3 ½ DAYS  | **$1769** |  | **$1404** |  | **$923** |  |  |
| 2 ½ DAYS | **$1230** |  | **$923** |  | **$615** |  | Session 27/28-8/22 |

***LUNCH IS INCLUDED/CLOSED ON FRIDAY 7/4/2025***

Payment Schedule:

Deposit: To enroll your child in our camp, fill out the form above and on the back and **enclose a non-refundable registration fee of $500 for each child. (New campers-2025 $200.00 registration fee & $300.00 towards tuition (2024 campers $100.00 registration fee & $400.00 towards tuition).**

Refunds: Except for the $500 registration fee for each child, all deposits are refundable until April 30th. After this time no refunds, reductions, or allowances will be given for any reason. If a child (three years old or younger) is not adjusting to camp, refuses to come at all, or attends only one day, you will be charged for two weeks of camp. **(NO EXCEPTIONS WILL BE MADE TO THIS POLICY FOR ANY REASON)** **. There are NO make-up days or switching of days for camp. If camp is open and you decide to keep your child home there is NO credit allowance.** It is agreed 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.

**Rainy days: There are 2 rain days that are built in.**

**Any changes made to your original session after April 30th will be charged a $50 fee.**

**Tuition must be paid in full on or before May 1, 2025-NO PAYMENT PLANS FOR HALF DAY SESSION.**

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 Country 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**

**There is a fee for transportation. Seats will be limited. First come first serve. The fee will be - 1 child $400.00, family of 2 $475.00. This is for pick up in the morning only.**

* **Check the box if you would like to be put on the list. (Remember this is on a first come first serve basis).**

**Personal Information:**

**Half day campers / 1 swim daily**

What activities do you think your child will enjoy most? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What is your child’s eating habits? \_\_\_\_\_\_\_\_ Good \_\_\_\_\_\_\_\_\_ Fair \_\_\_\_\_\_\_\_\_ Poor \_\_\_\_\_\_\_\_\_

Any food allergies? \_\_\_\_\_\_ Explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does your child have any other allergies? \_\_\_\_\_ Explain \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Permission Slip:**

Medical Emergencies: If you cannot be reached: contact name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Relationship to child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Telephone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pictures: 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.

Sunscreen: I give Big Chief Camp permission to help my child apply sunscreen to themselves.

Release: I give the following two people permission to pick up my child from camp:

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone \_\_\_\_\_\_\_\_\_\_\_ Relationship \_\_\_\_\_\_\_\_\_\_\_

**Parent’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**