



2011 CAMPER APPLICATION

CAMP MAAS AGREE OUTPOST CAMP CAMP KENNEDY

**PLEASE ATTACH
A RECENT
CAMPER PHOTO

(Mandatory)**

| | |
|-------------------------|--------------------------|
| CAMPER LAST NAME | CAMPER FIRST NAME |
|-------------------------|--------------------------|

| | | | |
|--|-------------------------|---|--|
| Father | Mother | CAMPER PERMANENT ADDRESS | EMERGENCY CONTACT (other than parent) |
| Last Name | Last Name | Street | Full Name |
| First Name () | First Name () | City | Relationship |
| Home Phone () | Home Phone () | State Zip Code Country | Home Phone |
| Work Phone () | Work Phone () | Family Status: Married Divorced Separated Single Other Camper lives with: Both Parents Mother Father | Work Phone Cell Phone |
| Cell Phone | Cell Phone | | SECOND CONTACT |
| E-mail Address | E-mail Address | Send invoice to: Both Parents Mother Father | Full Name |
| Tamarack Alumni: Yes | Tamarack Alumni: Yes | Send mail to : Both Parents Mother Father | Relationship |
| PARENT ADDRESS IF DIFFERENT THAN CAMPER'S | | Step-Mother Name | Home Phone |
| Street | Street | Step-Father Name | Work Phone Cell Phone |
| City | City | PLEASE ENROLL MY CHILD IN: (Grade Entering Fall of 2011) | |
| State Zip Code | State Zip Code | | |

| | |
|------------------------------------|---|
| CAMPER INFORMATION | |
| Date of Birth (mm/dd/yy) | Health Insurance Name |
| Male Female | Health Insurance Number |
| Grade Entering Fall of 2011 | Doctor's Name |
| Camper E-mail | Doctor's Phone |
| School | T-Shirt Size: |
| Religious School | Child 14-16 Adult M |
| Returning Camper Yes No | Adult L Adult XL |
| Year Last Attended _____ | A BUNK REQUEST FORM WILL BE AVAILABLE IN FEBRUARY. |

| | |
|---|----------------------------------|
| MINI A - Grades 2 to 5 | SUPER SEASON |
| MINI B - Grades 2 to 5 | Grade 2 to 7 |
| MINI C - Grades 2 to 5 | Grade 8 - RUACH/RUACH |
| SESSION 1 - Grades 2 to 7 | Grade 8 - PIONEER/RUACH |
| SESSION 1 - Grade 8 - RUACH | Grade 8 - RUACH/PIONEER |
| SESSION 1 - Grade 8 - PIONEER | Grade 9 - SPECIALTY/SPECIALTY |
| SESSION 1 - Grade 9 - SPECIALTY | Grade 9 - SPECIALTY/AGREE |
| SESSION 2 - Grades 2 to 7 | Grade 9 - AGREE/SPECIALTY |
| SESSION 2 - Grade 6 - DANCE CITY | AGREE Session 1 - Grade 9 |
| SESSION 2 - Grade 8 - RUACH | AGREE Session 2 - Grade 9 |
| SESSION 2 - Grade 8 - PIONEER | KENNEDY - Grade 10 |
| SESSION 2 - Grade 9 - SPECIALTY | AVODAH: |
| TSS/HADRACHA - Grade 11 | Session 1 |
| HORIZON CAMPER: | Session 2 |
| | Super Season |

PLEASE COMPLETE BOTH PAGES, PRINT, SIGN, AND RETURN VIA EMAIL, MAIL, OR FAX.

www.tamarackcamps.com / Email: tamarack@tamarackcamps.com

Mail: 6735 Telegraph Rd. • Ste. 380 • Bloomfield Hills, MI • 48301 • Phone: 248-647-1100 • Fax: 248-647-1493

TERMS & CONDITIONS (Please retain a copy for your records.)

I, as the parent or guardian and on behalf of my Camper, understand, acknowledge and agree as follows:

1. A \$500 deposit, per Camper, is due upon registration. A \$100 deposit, per Camper, is due if you are applying for financial aid (see below). Applications received after 4/1/11 must be paid in full at the time of registration.
2. ALL CAMP FEES ARE DUE IN FULL BY 4/1/11. Failure to pay in full by 4/1/11 may result in the loss of any early discounts received or cancellation of your child's program. A \$100 late fee will be assessed to each Camper if fees are paid after 4/1/11.
3. Cancellations made prior to 1/31/11 will be charged a \$250 processing fee for each Camper. Any cancellations after 1/31/11 will result in a forfeited deposit. Deposits are not transferable. After 4/1/11, 50% of camp fees are non-refundable. After 6/1/11, all camp fees are non-refundable. All cancellations or changes to programs must be in writing.
4. Camper registration will begin on 10/18/10, at 9 am for returning 2010 Campers, and on 11/1/10, at 9 am for all other Campers. All returning Camper applications received by 10/18/10 at 9 am will receive equal priority. All new Camper applications received by 11/1/10 at 9 am will receive equal priority. Camper registration is determined by the date and time an application is received. If, on the first day of registration at 9 am, more applications are received than spaces are available for a specific program, a random drawing will be held to include all complete applications. Campers not randomly selected will be provided with other camp options, if available.
5. Tamarack Camps reserves the right to cancel a program due to insufficient registration. A full refund will be provided in the event of a program cancellation.
6. There are no reductions from the camp fee for a Camper arriving late or leaving early.
7. A Tamarack Camps Medical Form (signed by a physician and parent or guardian) must be received by 5/1/11. I am responsible for notifying Tamarack Camps of all physical, medical and/or emotional needs of my Camper which may impact his/her ability to participate.
8. Tamarack Camps, a private, religious organization, has the sole and absolute discretion to (a.) reject or dismiss a Camper, without refund, for any reason including, but not limited to, unsatisfactory conduct or any situation which impairs a Camper's ability to participate, (b.) alter/change a program or bunking arrangements, and (c.) search the personal belongings of a Camper.
9. The camping experience involves activities that come with certain risks and uncertainties including, but not limited to, horseback riding, ropes course, rafting, biking, climbing, zipline, swimming, diving, land sports, boating, bus trips, weather conditions, plants, insects and rugged terrain. I assume these risks and agree to allow my Camper to participate in all Tamarack Camps activities, including all activities and trips not on camp property. I hereby agree to release, indemnify, defend (including the payment of actual attorneys' fees and costs of a judgment/settlement) and hold harmless Tamarack Camps, officers, directors, agents and employees, from any and all liability for damage, injury, death or illness to and/or caused by my Camper or his/her property that directly or indirectly relate to Tamarack Camps, whether on or off camp property.
10. The undersigned's exclusive method for resolving disputes hereunder shall be by arbitration in accordance with the Rules of American Arbitration Association (the "AAA") before 1 arbitrator designated by the AAA. Judgment may be rendered by the court upon the arbitration award and execution may be issued upon the judgment. The exclusive venue and jurisdiction for any arbitration shall be in Oakland County, Michigan. The liability of Tamarack Camps shall be limited to the program fee. All claims by the undersigned will be extinguished if not brought within 180 days following the incident giving rise to such dispute.
11. In the event of an emergency, Tamarack Camps and/or medical staff has authority to act on my behalf according to its best judgment. I understand that I am responsible for the costs relating to treatment of my Camper outside of Tamarack Camps.
12. My Camper's name, address, phone number, email, photograph and/or image may be used by Tamarack Camps and partner agencies of the Jewish Federation of Metropolitan Detroit.
13. My Camper agrees to the following "RULES OF BEHAVIOR" while at Tamarack Camps:
 No drugs, alcohol or smoking; no food may be brought into Tamarack Camps; no cell phones, knives or weapons; no bullying, swearing or stealing; no destruction of camp, staff or other Camper's property; no inappropriate sexual behavior; no inappropriate clothing; and no negative influence toward others and/or within the camp environment.

I have read the above *TERMS & CONDITIONS* and acknowledge that it is my responsibility to be familiar with all registration materials, policies, guidelines and details provided by the camp. I have reviewed and discussed the above *TERMS & CONDITIONS*, including "RULES OF BEHAVIOR," with my Camper and voluntarily agree to be bound hereby.

Signature of Parent or Guardian

Date

FINANCIAL AID

- Financial aid may be available to Michigan Jewish children based upon financial need. A \$100 deposit is required for each Camper.
- Campers registered for Super Season will receive aid for one session ONLY; the additional fee of \$1,500 for Super Season will be invoiced and must be paid. Financial aid is only given to one session per child.

Yes, I am interested in applying for financial assistance and would like to receive a confidential application.

PAYMENT METHOD (\$500 deposit per Camper; \$100 deposit per Camper applying for financial aid):

Check enclosed: Charge my credit card VISA or MasterCard: \$ _____

Card Number: _____ Expiration Date: _____

Name as it appears on credit card: _____

Credit card billing address: _____

"SEND A KID TO TAMARACK"

In order to enjoy a summer at Tamarack Camps, many of our Campers receive financial assistance. If you are able, please consider a tax-deductible donation to "Send a Kid to Tamarack".

Donation amount: \$ _____

Check enclosed

Charge my credit card

Bill me

This application will not be processed unless signed above by parent or guardian and deposit enclosed.