Camp Red Leaf 26710 W. Nippersink Rd, Ingleside, IL, 60041



Tel: 847.740.5010 Fax: 847.740.5014

# Camp Red Leaf, a division of Camp Nageela Midwest, Inc. REGISTRATION/CAMPER INFORMATION FORM 2019 \$725 before May 1<sup>st</sup>, 2019 / \$795 After May 1<sup>st</sup>, 2019

Camper	's name:			Nickr	Male   Female						
Street Address:					City:		State:	Zip Code:			
Home phone:					date:	_/	Age:				
Townsh	nip:			Whic	h year dio	the can	nper last attend Ca	mp Red L	eaf?		
		<u>Fa</u>	amily/Gu		-		•				
Parent/Legal Guardian:					Work Phone:				Ext:		
Home Phone:					hone:						
Email ad	ddress:	2 2 2 2 2 2									
Insuran	ce Carrier:			Policy	y Numbe	r:					
		Emerg	gency and	d/or Oth	er Conta	act Info	rmation				
	It is essent	ial that the person listed	below is co	ontactabl	e in an em	ergency,	please include all co	ntact infor	mation.		
Emerge	ncy Contac	t:	12 12 12 12 12 12 12 12 12 12 12 12 12 1	Relat	tionship t	o Campe	er:				
Home P	hone:			Cell P	hone:						
Work Pl	none:			Ext:				2 1 1 1 1			
Check Box	Session	Session Name	Dat	tes	Check Box	Sessio	n Session Na	me Dates			
		YOUTH/AD							10 18 0		
		Overnigh	T .		1						
	1	Adults (Age 18+)	June			4	Youth 1:1 (Age	9-17)	June 23-28		
	3	Youth (Age 9-17) Adults (Age 18+)	June 1								
	<u> </u>	Addits (Age 10+)	Julie .	10-21		and the second of the second o	- Santa-				
			ADULT T	RAVEL	CAMP \$2	050.00					
		Travel Camp Drop Off	: Monday	9AM	Travel Co	amp Pick	Up: Wednesday 5P	M			
ı	<b>]</b> 1	Adult (Age 18+) Travel Camp I Atlanta Georgia	July 15-24	Cost \$2050		2	Adult (Age 18+) Travel Camp II Kansas City, Mo.	August 12-21	Cost \$2050		
		T. Marita Scorgia							1		
			YOUTH	H DAY C	AMP \$42	20.00					
			<del></del>		Pick up:	5pm					
	1	Youth (Age 9-17)	June 10-14			A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
	2	Youth (Age 9-17)		une 24-2							
	3	Youth (Age 9-17)	July	29 - Aug	ust 2						

### **BILLING INFORMATION**

## NO APPLICATION WILL BE ACCEPTED WITHOUT A COMPLETED TUITION EXPRESS FORM AND DEPOSIT PAYMENT. ACCOUNTS MUST BE PAID IN FULL PRIOR TO ATTENDANCE.

	Comp	lete Billing Addre	ess:	nent:			Pho	ne:	_
	Organization Responsible for Payment (Check all that apply):								
		Lambs Farm		Misericordia		IRIS/iLife		Sedol Foundation	
		Little City		Riverside Foundation		Community Care		Other:	
	Case Worker Name: Phone: Phone:								
SI	This form can be mailed directly to the office at: 26710 W. Nippersink Road, Ingleside, IL 60041 ATTN: Tyesha Smith								
	OR en Smith	nailed to your car   <u>Tyesha@nagee</u>	mp Di	rector Lauren Malecki   <u>l</u> dwest.org .	auren	@nageelamidwest.or	g or y	our Business Manager Tyesha	
	If you have any questions regarding the services offered or your billing profile, please give us a call at 847.740.5010.  Thank you for being a valued camper family.								
	20070020000	,							

<sup>\*\*\*</sup>No registrations will be processed without a signature. You must review and sign the terms and conditions below\*\*\*

#### TO REGISTER:

Fill out one Registration and Intake for each camper. Return these forms with your \$150.00 deposit (\$250.00 for Travel Camp) for each session you are registering. Registrations will be processed on a first come, first served basis. We will do all we can to honor your session requests. Camp Red Leaf, a division of Camp Nageela Midwest, Inc. reserves the right to make final session determinations.

#### **PAYMENT SCHEDULE:**

Deposit of \$150 is required with registration for each camp session (\$250 deposit is required for Travel Camp). Deposit must accompany registration. **Deposits are non-refundable**.

Payment in full is due by May 31, 2019. Interest will be charged at a rate of 2% per month for balances due after May 31, 2019. Auto Payments: Half of the balance is due March 31 if you registered before January 31, 2019. If you register between February 1 and March 31, half of the balance is due by April 30, 2019. If you register after April 1, 2019 half the total fee is due at the time of registration.

There will be a \$40.00 fee for all returned checks. If you would like to apply for a scholarship you can do so by via the website.

#### POLICIES:

**Medicals:** Medical forms and medication distribution forms must be completely filled out and signed by a physician for a camper to attend. CRL reserves the right to request a new Medical and / or medication form for any participant at any time.

Cancellations: Deposits are non-refundable. After May 31, 2019 payments beyond the deposit are not refundable unless the cancellation is due to medical reasons and a note from a physician is provided.

**Transfers:** Deposits are transferable between sessions but not between campers.

**Participation:** In the event that Camp Red Leaf, a division of Camp Nageela Midwest, Inc. determines that participation in the camp program is not appropriate, Camp Red Leaf, a division of Camp Nageela Midwest, Inc. reserves the right to dismiss that participant from the program and keep the deposit.

Intake Form: Each camper will be required to have an updated intake form at the camp office.

Fees: Fees are subject to change given 30 days' notice.

**Registration:** Camp Red Leaf, a division of Camp Nageela Midwest, Inc. are not responsible for the receipt or the quality of faxed registrations. If you choose to submit registrations by Fax please call the camp office to confirm that faxes have been received and are legible.

#### PARENT/GUARDIAN CONSENT

- 1. I request that the participant named on this registration be admitted to the Camp Red Leaf, a division of Camp Nageela Midwest, Inc. Program.
- 2. I have read and agree to abide the camp policies as written in the brochure, handbook, and on this registration.
- 3. I understand that as the parent/guardian submitting this registration on behalf of the named participant that I, alone, am responsible for the payment of the camp fees in accordance with the CRL payment schedule.
- 4. I give permission for the named participant to go on trips outside the camp facility.
- 5. I give permission for the named participant to be included in camp photos and/or videos for publicity purposes in a variety of media, including but not limited to, brochures, advertisements and the CRL website.
- 6. I understand that the Camp Red Leaf, a division of Camp Nageela Midwest, Inc. shall not be responsible for loss of personal property or personal injury sustained by the participant, and I hereby agree to indemnify and hold harmless Camp Red Leaf, a division of Camp Nageela Midwest, Inc. from such losses or injuries.
- 7. In the event I cannot be reached in an emergency involving the named participant, I hereby give permission to the appropriate medical personnel, selected by the Camp Director, to provide medical treatment deemed necessary by such medical personnel, including, but not limited to x-rays, tests, injections, blood transfusions, hospitalization, anesthesia, and surgery.
- 8. I understand that a medical form and a medication distribution form must be filled out, signed by a physician, and returned before the first day of camp.
- 9. I agree not to send the named participant to camp if he/she has been ill or exposed to a contagious illness/disease within three weeks of the date he/she is to report to camp, and I will notify the camp regarding the condition immediately.
- 10. I hereby verify that all the information listed on this registration is true and correct.
- 11. I have read and understand all the policies as outlined on this registration.

***Parent/Guardian Signature:	Date: /	/	/