



2024 Camp Enrollment

Camp Dates: Monday, July 8, 2024 – Friday, August, 16, 2024

CHILD'S NAME:	Date of Birth:
Address:	Home Phone:
Parent/Guardian 1 Name: Parent/Guardian 1 Email:	Parent/Guardian 1 Cell: Parent/Guardian 1 Work Number :
Parent/Guardian 2 Name: Parent/Guardian 2 Email:	Parent/Guardian 2 Cell: Parent/Guardian 2 Work Number:

Select class and circle member /non member	Class	Days	Member	Non-Member
	2's 9:30 – 12	M-F	\$1,900	\$2,050
	3's 9:15– 2	M-F	\$3,036	\$3,186
	4's 9:15-2:30	M-F	\$4,290	\$4,400

Please complete this application and return to the Gan Shalom Nursery School Office with a non-refundable deposit of \$250 no later than Monday, May 6th.
Please make checks payable to RSNS (Reconstructionist Synagogue of the North Shore).

For additional information: Please call 516-627-6274 or email Director Adrienne Rosen at ganshalom@rsns.org.

POLICY STATEMENT

1. A non-refundable deposit of \$250 is applicable, and must accompany this form to register your child for Camp Gan Shalom.
2. The final payment for the camp is due by June 1st. All balances must be paid in full before the first day of camp.
3. Class placements will be based upon age and class size limits, and are made at the discretion of the Camp Director.
4. Parents are responsible for arranging transportation for their children to and from school.
5. If you will be late to pick up your child, the director and counselors must be notified.
6. This form and deposit secure registration for your child. For your child to attend Gan Shalom Summer Camp, you must complete forms required by OCFS (including an updated medical form) which can be found on the RSNS website.

I have read this application and consent to my child's enrollment at Gan Shalom Summer Camp. I have been advised of the policies regarding fees and services provided by Gan Shalom.

Parent/Guardian (Please print): _____

Parent/Guardian's Signature: _____

Date: _____

- I will pay tuition via check
- I will pay tuition through ShulCloud