



**Camper's Name:**

**Registration Application  
(Complete one form per camper)**

Birthdate:

Age:

Grade:

**Parent or Guardian Names:**

Home Phone:

Work Phone:

Cell Phone:

Address:

City:

State:

Zip:

Email Address:

**Emergency Contact Name:**

Relationship:

Phone

**Health Information**

Please list important Health Information (allergies, medications, health problems, etc.):

Did your child attend Summer Camp Shalom in the past?      Yes      No

A Health Form must be on file to attend this program. Is there any change in your child's health information?      Yes      No

(Signature of Parent)

**Field Trip/Emergency Action**

I hereby grant permission for my child to participate in field trips and activities. I give permission to the JCC to authorize any emergency action necessary to ensure the safety of my child. I understand the JCC is not financially responsible for the medical or emergency care given to my child.

Yes      No

**Communications**

I permit the use of our names and/or pictures in broadcast, newspaper, brochures, social media, or other forms of communication.

Yes      No

If you have any questions regarding this registration form, call Meryl Hattenbach 937-401-1550 or email at [mhattenbach@jfgd.net](mailto:mhattenbach@jfgd.net).



Camper's Name:

Please select camp dates

Day	Camp Dates	Early Bird \$38 / day	After Dec 1 \$46 / day	Rise & Shine \$ 2	Stay & Play \$5
1	Mon. Dec 18				
2	Tues. Dec 19				
3	Wed. Dec 20				
4	Thur. Dec 21				
5	Fri. Dec 22				
6	Tues. Dec 26				
7	Wed. Dec 27				
8	Thur. Dec 28				
9	Fri. Dec 29				
10	Tues. Jan 2				
11	Wed. Jan 3				
12	Thur. Jan 4				
13	Fri. Jan 5				

Session rate\*

\$330

\$410

\*Session rate includes any two consecutive weeks during the holiday break, plus MLK Day and Presidents Day.

Individual days (#of days x rate):

Rise & Shine (#of days x \$2):

Stay & Play (#of days x \$5):

Total Program Fees:

Payment Information

Option 1: Pay by check: please make payable to: Jewish Federation of Greater Dayton (JFGD)

Option 2:

VISA

MasterCard

Discover

Name on Card:

Card #

3 Digit Security Code on Back:

Expiration Date:

All registration forms and payment should be emailed to Camp Shalom at campshalom@jfgd.net or mailed to: Jewish Community Center of Greater Dayton Attention: Camp Shalom 525 Versailles Drive Dayton, Ohio 45459