



2010 Application

Girls Session: Tuesday, June 22 – Monday, July 12
Boys Session: Monday, July 12 – Sunday, August 1
 Girls Visiting Day: Sunday, July 4 Boys Visiting Day: Sunday, July 25

1 CAMPER CONTACT INFORMATION

Last Name	First Name	Preferred Name	Hebrew Name
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address		City	State Zip
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone	Camper Cell Phone	Camper Email	
<input type="text"/>	<input type="text"/>	<input type="text"/>	

2 FAMILY INFORMATION

Father Name	Father Cell Phone	Father Email
<input type="text"/>	<input type="text"/>	<input type="text"/>
Father Occupation	Father Work Phone	
<input type="text"/>	<input type="text"/>	
Mother Name	Mother Cell Phone	Mother Email
<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Occupation	Mother Work Phone	
<input type="text"/>	<input type="text"/>	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Other _____ Custody: <input type="checkbox"/> Joint <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Other _____		
<input type="checkbox"/> All camp paperwork will be emailed to the email addresses above, if you would like a copy mailed to you, please check here.		
Camper's Emergency Contacts (other than parents):		
Name	Phone Number	Relationship to Camper
<input type="text"/>	<input type="text"/>	<input type="text"/>

3 ADDITIONAL CAMPER/FAMILY INFORMATION

Birthday:	School Currently Attending	Hebrew School (If Applicable):	Current '09-'10 Grade
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Has your child attended Jewish overnight camp for at least 3 weeks ? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, which camp? <input type="text"/>			

Camper's T-shirt size: S kids M kids L kids S adult M adult L adult XL adult

Applicant is a: Returning Camper New Camper – If so, please tell us how you heard of Camp Nageela:

Rabbi/Affiliation _____ Friend _____ Nageela Event _____ Google/Search Engine

MySummerCamps.org KidsCamps.org Other _____

List two camper references, such as a principal, Rabbi, teacher, counselor or Community Rabbi:

Name Day Phone Number Evening Phone Number

Name Day Phone Number Evening Phone Number

How many siblings does camper have? Please list names, ages and schools they currently attend:

Family Affiliation:

Camper Born Jewish Converted Not Jewish

Camper's Father Born Jewish Converted Not Jewish

Camper's Mother Born Jewish Converted Not Jewish

If converted, year of conversion Synagogue affiliated with conversion:

Rabbi's Name Rabbi's Phone

4 CAMP FEES

CAMP TUITION - \$2,195

We offer the following bus transportation to camp. Please check off which service you would like:

- CHICAGO AREA \$60.00 CHICAGO O'HARE AIRPORT \$60.00 SAINT LOUIS \$60.00
- I WILL PROVIDE MY CHILD'S TRANSPORTATION TO AND FROM CAMP

FINANCIAL ASSISTANCE:

- Financial assistance is available. Please call the camp office to request an application for a scholarship. Applications must be submitted by January 31st 2010. Please check here if you are applying for a scholarship.
- Please check here if you are applying for the first time or second time camper incentive program offered by the Foundation for Jewish Camps. You can apply at www.onehappycamper.org or call the Camp Nageela office at 773-604-4400.

5 SPONSORSHIP OPPORTUNITY

Help campers in need attend CNM

I wish to help other children attend Camp Nageela Midwest by making the following donation:

- Sponsor a camper \$100
- \$360 \$72
- \$180 \$36 Other: \$_____

6 TOTAL FEES

of Campers

_____	\$2,195 Camp fee	=	\$ _____
_____	\$ _____ Transportation per child	=	\$ _____
_____	Other fees or discount from _____	=	\$ _____
Grand Total			\$ _____

7 PAYMENT ARRANGEMENT

- Check enclosed
 Credit Card (form CC guarantee)

Payment in full must be received by June 30th, 2010

- Charge my credit card for the full amount upon acceptance
 Charge my credit card for the postdated arrangement listed below
 Check for the full amount enclosed
 Postdated checks are enclosed in the arrangement listed below

1st Charge: *Application Deposit* \$250 2nd Charge: Date _____ Amount _____
 3rd Charge: Date _____ Amount _____ 4th Charge: Date _____ Amount _____



- please send me a scholarship application (refunds will be issued upon approval of scholarship).

Please make checks payable to Camp Nageela Midwest.

8 CREDIT CARD GUARANTEE

(REQUIRED) to be filled out by party responsible for financials:

Please supply us with a credit card. If no payment arrangements are made in a timely fashion, the credit card will be used for camp payments and for any unforeseen medical costs during camp. (i.e. prescriptions and/or Dr. fees).

<input type="checkbox"/> 		<input type="checkbox"/> 	
Credit Card Number	Exp. Date	CCV (3 digits)	
____-____-____-____	____/____	____	
Billing Address	City	State	Zip
_____	_____	_____	_____
Billing Name			

Authorized Signature	Date		
_____	_____		

9 FINANCIAL RESPONSIBILITY

If the party responsible for the camp fees is not the legal guardian, please indicate below:

First Name	Last Name	Relationship to Camper
_____	_____	_____

Address	City	State	Zip
Home Phone	Work Phone	Cell Number	
I hereby agree to pay in full the fees for the camper(s) above.			
Signature (required)		Date	

CANCELLATION/REFUND POLICY: There is a non-refundable \$250 deposit required with registration;

After April 1, 2010 — **No Refunds.**

All cancellations must be submitted in writing to obtain a refund.

TRIP PERMISSION AUTHORIZATION/INJURY POLICY: By completing/signing this application, I hereby authorize Camp Nageela Midwest to take my child off camp grounds to go on trips organized as part of the camping program. This may include swimming and/or boating sites. In addition, my child may participate in any activity organized by Camp, including but not limited to land sports, lake front activities, rope course, indoor activities, bicycling, hiking, cookouts, etc. and we assume the inherent risk of such activities and programs. We will not hold camp responsible in the event of injury, property damage or loss as a result of such activities.

I understand that Camp is not responsible for loss or damage to my child's property incurred during the session or during the transportation to and from camp.

I understand that Camp has the right to dismiss any camper, without refund, who threatens the safety of him/herself or other campers; who willfully damages camp property; who willfully disregards rules of Camp; who steals or intentionally damages the property of other people in camp or who requires significant supervision beyond which the camp can provide. Should my child be dismissed, I understand that I must arrange transportation for my child to leave camp, at my own expense, within 24 hours, and that I am responsible for any additional expenses required to ship luggage home.

IF YOU DON'T HEAR FROM US: if you don't hear from us within three weeks, call the camp office to confirm receipt of this application. We cannot be held responsible for mail delays or improper fax transmissions. Please feel free to call us if you have any questions at 773-604-4400.

I have read the camp cancellation/refund policy and the camp "Trip Authorization" and agree to all its conditions and terms. Unless otherwise specified, the parent who signs is responsible for payment of all camping fees.

Parent's Signature (required) _____

Date

Print Name _____

Please mail/fax your application to Camp Nageela Midwest: 3542 W. Peterson, Chicago, IL 60659 * Fax: 773-604-4405