



Hillel Academy Camp

2019 Registration Form

Hillel Academy of Pittsburgh
5685 Beacon St
Pittsburgh, PA 15217
www.hillelpg.org
412-521-8131

Today's Date _____
Family Name _____
Address _____ City _____ State _____ Zip _____
Home Phone _____
Father's Name: _____ Mother's Name: _____
Cell Phone: _____ Cell Phone: _____
Email _____ Email _____

Camper Information

Camper's Name _____ Gender: M ___ F ___ Birth Date _____
Current School _____ Grade (Fall 2019) _____
T-Shirt Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large
Applying for: Mini Machaneh* Machaneh Hillel Hillel Torah and Travel Camp
(Please circle) Weeks of: 6/24 7/1 7/8 7/15 7/22 7/29 Whole Summer
Extended Care: Before Camp (8-9 AM) After Camp (4-5 PM)

Camper's Name _____ Gender: M ___ F ___ Birth Date _____
Current School _____ Grade (Fall 2019) _____
T-Shirt Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large
Applying for: Mini Machaneh* Machaneh Hillel Hillel Torah and Travel Camp
(Please circle) Weeks of: 6/24 7/1 7/8 7/15 7/22 7/29 Whole Summer
Extended Care: Before Camp (8-9 AM) After Camp (4-5 PM)

Camper's Name _____ Gender: M ___ F ___ Birth Date _____
Current School _____ Grade (Fall 2019) _____
T-Shirt Size: Youth Small Youth Medium Youth Large Adult Small Adult Medium Adult Large
Applying for: Mini Machaneh* Machaneh Hillel Hillel Torah and Travel Camp
(Please circle) Weeks of: 6/24 7/1 7/8 7/15 7/22 7/29 Whole Summer
Extended Care: Before Camp (8-9 AM) After Camp (4-5 PM)

******Note: Children must be potty trained!******

Emergency Contact (Other than parents):

Name _____ Phone Number _____
Name _____ Phone Number _____

Health Notes

Doctor's Name: _____ Phone: _____
Do any of the children attending camp have any health problems or disabilities? _____
Medication? _____ Allergies? _____

Camp Dates and Pricing

June 24 - August 2, 2019

Camp will run 9 AM - 4 PM Daily *

	<u>Weekly Price</u>	<u>Full Summer</u>
<u>Mini Machaneh (going into Pre-K & K)</u>	\$195	\$1170
<u>Machaneh Hillel (going into 1st-3rd)</u>	\$195	\$1170
<u>Hillel Torah & Travel Camp (going into 4th-8th)</u>	\$240	\$1,440

* Extended care will be available before camp (8-9 AM) and after camp (4-5 PM) for \$35/ hour per week. There is NO after camp on FRIDAYS!

There is a \$50 non-refundable deposit per camper due with registration that will be applied towards camp tuition. Camp tuition must be paid in full by June 1.

Parental Consent:

I hereby give consent for my child to attend and participate in all activities of Hillel Academy Camp including any excursions and/or trips which relate to the camp experience. My child and I are familiar with the Hillel Academy Camp standards of conduct and we understand that if my child violates the standards or does not exercise good judgment in his/her behavior, Hillel Academy Camp has the right to dismiss my child without refund. I am aware that I will be held responsible for any damage to public or private property that Hillel Academy Camp states my child caused and agree to fully reimburse all parties involved. In the event of my child's dismissal, I acknowledge that it is my responsibility to secure immediate transportation home for my child at my sole expense. In the event I am unable to secure immediate transportation, I grant permission for Hillel Academy Camp to arrange transportation at my sole expense. I consent to this transportation, and I agree to fully reimburse Hillel Academy Camp for any expenses incurred within one week of the event.

Concerning my child's medical needs, I certify that my child is fully capable of participating in all activities associated with Camp, and that my child has no unreported physical or mental disabilities or infirmities that would restrict full participation. I understand that in case of emergency, every effort will be made to contact me or my emergency contact. If we cannot be reached, I give permission to the physician or EMT selected by Hillel Academy Camp to hospitalize, secure proper treatment for, and to order injection, anesthesia, or surgery for my child. I agree to reimburse immediately and/or accept primary financial responsibility for the total cost of all medical care provided to my child.

I acknowledge and am willing to assume and accept any risks associated with my child's participation in any aspect of Camp, and I agree that the terms of this waiver will likewise bind me, my child, my heirs, legal representatives, and assignees. I release and will defend, indemnify, and hold harmless Hillel Academy Camp, its directors, owners, agents, employees, and volunteers ("releasees") from every claim and any liability that I or my child may allege against the releasees (including reasonable legal fees and costs) as a direct or indirect result of harm to my child while s/he is in the care of Hillel Academy Camp.

I grant permission for Hillel Academy Camp to use in their promotional materials any photograph or video images of my child which may be taken during Camp and I accept that Hillel Academy Camp will not be responsible for any "lost and found" items that remain unclaimed after 30 days.

I have read and agree to all of the terms and conditions in this Registration Form. I am including a non-refundable \$50.00 registration deposit for each camper along with submission of this form.

Parent (or Legal Guardian) _____ Date _____