



# 2010 REGISTRATION FORM

For more forms please visit our website at [www.hillsidesummerncamp.org](http://www.hillsidesummerncamp.org)

Make checks payable to **Green Chimneys.**

Mail to: **Hillside Summer Camp, 400 Doansburg Road, Caller Box 719, Brewster NY 10509, Attn: Camp Registrar.**  
(845) 279-2995, ext. 166, E-mail: [mneri@greenschimneys.org](mailto:mneri@greenschimneys.org)

### 2010 DATES & RATES

**Session 1:** June 28 – July 16 (3 weeks)

**Session 2:** July 19 – August 6 (3 weeks)

**Session 3:** August 9 – August 27 (3 weeks)

**(Monday – Friday: 9:00 a.m. – 4:30 p.m.)**

\*\*There will be no camp on Monday July 5th, 2010\*\*

#### TRAILBLAZERS (ages 5–8)

One Session: \$800, Deposit \$100

Full 9 Week Session: \$2,250, Deposit \$300

#### BLAZERS (ages 8-10)

One Session: \$825, Deposit \$100

Full 9 Week Session: \$2,475, Deposit \$300

#### TRACKERS (ages 11-15)

One Session: \$900, Deposit \$100

Full 9 Week Session: \$2,550, Deposit \$300

#### ADVENTURE (ages 10-15)

One Session: \$1,150, Deposit \$100

Full 9 Week Session: \$3,300, Deposit \$300

#### BEFORE CARE (all ages) begins 7:30 a.m.

One Session: \$75, Deposit \$25

Full 9 Week Session: \$225, Deposit \$75

#### AFTER CARE (all ages) ends 6:00 p.m.

One Session: \$75, Deposit \$25

Full 9 Week Session: \$225, Deposit \$75

#### ONE-TO-ONE SERVICE

One Session: \$1,050 (plus regular program fees), Deposit \$100

Full 9 Week Session: \$3,000 (plus regular program fees), Deposit \$300

**\$100 deposit per session/child required.** The deposit is deducted from the total fee. Balance is due one month prior to each session.

Camper's Last Name	Camper's First Name	Birthday (mm/dd/yy)	Gender	Grade*	Session (I, II, III)	Name of Group	Before/After Care	Total Fee

#### PAYMENT METHOD:

Check: **(Make checks payable to Green Chimneys)**

Check # \_\_\_\_\_ Amount Enclosed (**\$100 per session/child**) \$ \_\_\_\_\_

Credit Card (circle one): **Visa, MasterCard, or American Express** (Discover is not accepted)

Card # \_\_\_\_\_ Amount Enclosed (**\$100 per session/child**) \$ \_\_\_\_\_

Exp. Date: \_\_\_\_\_

I have read the terms of enrollment and other related information and agree to accept them. I give my permission for my child(ren) to participate in all activities, including trips away from the camp and any scheduled overnights. I understand that Hillside Camp assumes no responsibility for personal property of campers. Photos taken may be used for publicity purposes. My signature also allows Hillside to charge my credit card the amount indicated above. \*As of September 2009.

\_\_\_\_\_  
Parent or legal guardian signature

\_\_\_\_\_  
Date

**\*\*Please complete the back of this form with your contact information.**



## **FAMILY INFORMATION**

### **Father/Guardian:**

Title: \_\_\_\_\_

(Mr., Mrs., Miss etc.)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Cell / Pager #: \_\_\_\_\_

Email: \_\_\_\_\_

### **Mother/Guardian:**

Title: \_\_\_\_\_

(Mr., Mrs., Miss etc.)

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Home #: \_\_\_\_\_

Work #: \_\_\_\_\_

Cell / Pager #: \_\_\_\_\_

Email: \_\_\_\_\_

## **CAMPER INFORMATION**

### **Address:**

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

### **Other Information:**

School: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

### **Camper lives with:**

- Mother
- Father
- Mother & Father
- Other (please specify): \_\_\_\_\_

### **Family Status:**

- Married
- Divorced
- Separated
- Single Mother
- Single Father
- Other \_\_\_\_\_

### **Custody:**

- Joint
- Mother
- Father
- Grandparent(s)
- Guardian(s)
- Other \_\_\_\_\_