



Camp Kayetz 2012 Summer Camp

June 18—July 13 9am—3pm

Payments: All applications must include a \$100.00 non-refundable deposit per child and be received in the temple office by May 2nd.

To receive the Early Bird Discount, fees must be PAID IN FULL by May 2nd.

Sibling Discount: \$30.00 discount on 2nd and subsequent siblings' tuition.
 \$50.00 discount if attending all 4 weeks. (**Not applicable if either child is a CIT.**)

Partial Attendance: Camp is designed as a 4-week program. If your child can only attend for 2 or 3 weeks, we will try to accommodate your family. Fees will be prorated and a \$50.00 split-session fee per child will be charged.

Refunds: There will be **no reduction or refund of fees** due to absences, illness, or withdrawal.

Camp Scholarships: Financial assistance is available. Please contact the TBE office at 479-3444 for an application. Deadline for campership request is Monday, April 12, 2012.

Mandatory Parent(s) Meeting: Wednesday, May 30th, 7:30pm – 9:00pm at the Temple.

All applications must be received by May 2nd

For office

Camp Kayetz 2012 Application

Applications must include signature and deposit or full payment and be received by May 2nd. Make checks payable to TBE, memo

Fill out a separate application for EACH child

Camp Kayetz, and return to: **TBE, 3055 Porter Gulch Road, Aptos, CA 95003.**

Camper: _____ Age on 6/18/12 _____ Grade in Sept. '12 _____ DOB _____

Mailing Address: _____ City _____ Zip _____

Parent #1 Name: _____ E-mail: _____

Daytime Phone: _____ Evening Phone: _____

Parent #2 Name: _____ E-mail: _____

Split-Session? Check which weeks attending

Week 1 Week 2 Week 3 Week 4

What's your camper's T-shirt size! Circle one (1).

Child S M L OR Adult S M L XL

Fees	Early Bird Discount	Paid After May 2nd
TBE Members	\$840	\$875
Non-members	\$965	\$1,100
CIT's	\$760	\$795

Signature of parent / guardian: _____

Date: _____

Camp fee \$ _____
 Reduction for attending 2 or 3 weeks (x.5 or .25) - \$(_____)

Base Fee \$ _____

Adjustments to Base Fee

\$50 Split Session fee + \$ _____

Sibling discount? (only on 2nd and subsequent camper) - \$(_____)
 (no discounts on CITs)

If you bring back your Kayetz water bottle, deduct \$10.00 - \$(_____)

CAMPER'S FEE \$ _____

Deposit (\$100.00 minimum) \$ _____

Balance Due by June 1st \$ _____



Temple Beth El JCC Summer Day Camp

Come join the fun!

Camp Kayetz

June 18—July 13, 2012

* no camp July 4th

For Campers 6-12 years old; CITs 13-15 years old



Summer Fun in a Framework
of Jewish Culture, Customs and Ethics

Visits to Parks and Beaches 🎵 Camping Trip 🎵 Raging Waters
Music & Theatre 🎵 Special Shabbats 🎵 Arts & Crafts
Sports 🎵 Making new friends/strengthening old friendships
Great America (for CITs)

Camp Hours: 9am –3pm Monday– Friday

Sorry, we do not offer before or after camp care. Campers provide their own lunch, drinks, and snacks. Camp provides six (6) meals on the overnight trip.



Camp Director Mimi Guiney will return for her 12th summer at Camp Kayetz, and the 4rd year as Director. She knows the value of camp experiences, especially with Jewish connections, as she was a day & resident camper in her youth, a NFTY camper & officer, and the mom of two campers & NFTY-ites. She loves music, Israeli dance, cooking, crafts, and having fun. She promises to take excellent care of your child(ren) while vowing to never grow up.

Counselors-in-Training (CITs). CITs receive valuable leadership training and serve as helpers while participating in camp activities. As leaders and role models, they **must be available all four (4) weeks**, be responsible, and enjoy working with children. To apply for a CIT position, please call Mimi at 335-4560 to schedule an interview. The CIT Program is designed for 13—15 year olds entering 8th—10th grades.

Everyone is a winner at Camp Kayetz!



We offer a warm, nurturing, safe, and creative atmosphere and look forward to welcoming your child to camp. **Space is limited. Please complete the application on the reverse side promptly. Deadline for applications is May 2nd. Fees must be paid in full by May 2nd, 2012 to earn the Early Bird Discount. All fees must be paid in full by June 1, 2012.**

NEXT

Camp Kayetz 2012 Summer Camp Medical Release

Return to Temple office by May 2nd,

Fill out a separate application for EACH child

Camper: _____ Age on 6/18/12 _____ Grade in Sept. '12 _____ DOB _____

Mailing Address: _____ City _____ Zip _____

Parent #1 Name: _____ E-mail: _____

Daytime Phone: _____ Evening Phone: _____

Parent #2 Name: _____ E-mail: _____

Daytime Phone: _____ Evening Phone: _____

Name and phone # of person(s) authorized to drop off/pick up my child:

1) _____

2) _____



Is your child allergic to any medications, food, insects, etc? _____

Emergency Contacts: To be able to reach you, please give us the most reliable phone numbers.

Parent #1 Day: _____ Evening: _____ Cell: _____

Parent #2 Day: _____ Evening: _____ Cell: _____

Alternate Person Day: _____ Evening: _____ Cell: _____

Physician: _____ Phone: _____ Medical insurance: _____ Policy #: _____

Dentist: _____ Phone: _____

I give my permission for my child to take part in all activities including trips away from TBE. In the event of illness or accident, you are authorized to take such emergency action as you deem necessary for the welfare of my child. I authorize TBE to take such action on behalf of myself. I hereby release and discharge Temple Beth El Jewish Community Center of Santa Cruz County, including its agents and employees, of and from all causes of action for injuries or damages to my child in any way arising from or growing out of participation in said outings.

Signature of parent/guardian: _____

sign here

Date _____

Camper Information

Help us learn more your child so we can better work with her/him. Please fill out this as completely as possible. A complete physical by a physician is **NOT** required to attend camp.

1. Has your child been to camp before? If so, where? Was it a good experience? If not, why? Please explain.

2. (a) Does your child have any friends who will be attending our camp? Please give us their names?

(b) Please give the names of campers with whom your child wishes to be grouped. _____

(c) What are his/her peer/sibling relationships like? _____

Over

3. What information can you give us about your child that will help us work with her/him (interests, likes, dislikes, past problems in camp or school, fears, etc.)? _____

4. Please share with us any information you think might be helpful to assist us in providing a wonderful summer experience for your child (list any activities he/she dislikes): _____

5. In what area would you like to see your child grow this summer? What would you like us to stress?

6. Does your child have any food allergies? List allergies: _____
Does your child keep kosher: _____ Is your child a vegetarian/vegan? _____

7. Does your child have any physical disabilities? _____ Should activity be restricted? _____
Is your child on any medication? List medications: _____
Did your child receive any special services at school? Please list: _____

8. How does your child act in a group? _____

9. Please circle one: My child is an: excellent good poor swimmer.

My child: should should not be allowed to swim in deep water.

10. FAMILY

Marital Status: _____ Number of children: _____

If parents are separated or divorced, what is the custody arrangement? _____
With whom does your child live?: _____

11. HOME: Has the family moved in the last 6 months?: _____ From where? _____

Have there been any recent traumatic experiences in the family: _____

12. CHILD: What are your child's most positive qualities? _____

13. RETURNING FAMILIES: What did your child particularly enjoy last summer? _____

14. What suggestions would you make to improve Camp Kayetz this year? _____

14. ADDITIONAL COMMENTS: _____

Signature: _____



Date: _____

Thank you very much. If you have further questions or comments,
Contact Mimi Guiney 335-4560 or miriambg@sbcglobal.net