



# Cambridge Camp 2010

June 14-August 13\*

Monday through Friday

Activities include: *SmartStart!* academic essentials, dance, music, drama/theatre, visual arts, science, technology, digital video and photography, sports activities (basketball, kickball, tennis, swimming), field trips, service projects, nature studies, and much more.

Ages 3-11 or entering Pre-K through 6<sup>th</sup> grades.



**\*LOCATED AT THE CAMBRIDGE SCHOOL IN NORTH KENWOOD**

Early Registration begins March 1st. Registration ends May 31st.

# CAMBRIDGE CAMP Summer Program

## REGISTRATION FORM

Please complete this form to register your child for Cambridge Camp 2010 Summer Camp. This form, shot records, and application fee must be submitted for each student to be enrolled in a Cambridge Camp camp. Contact Cambridge Camp for payment plan information. Incomplete forms will be returned. A parent or guardian must sign this form. Be sure to print all information carefully and to include payment in full by check or money order. *All registration forms must be accompanied with a record of immunizations (including date of last tetanus shot) and a record of all allergies.*

### Important Information Before You Register Your Child:

1. Completed registration form and waiver release are required.
2. ***Financial Assistance pack ages available at [factstuitionaid.com](http://factstuitionaid.com)! Everyone should apply!***
3. A non-refundable application fee of \$75 is required.
4. Applications are processed on a first-come, first-serve basis.
5. Cambridge Camp will provide daily healthy and nutritious snacks included.
6. *Camp fee is \$1,800 per child for the entire nine-week summer. (That's just \$40/ day!)*
7. *Extended care from 3:00 PM – 6:00 PM is available for an additional \$75/ week or an additional \$675 for the entire nine-week summer.*

### For which camp and date(s) are you registering?

- University Camp:** June 14 – August 13, 2010, located at The Cambridge School (46<sup>th</sup> and Ellis Ave., Chicago)
- Add Extended Afternoon Camp from 3:00 PM**  **6:00 PM**

Camp times are Monday-Friday, 9:00 AM to 3:00 PM. Before care (8:00 AM) is available with no extra charge.

### INFORMATION ABOUT YOUR CHILD (ONE APPLICATION PER CHILD)

Student Name: _____	Age: _____	Date of Birth: _____
School: _____	Circle Entering grade in Fall 2009: PK K 1 2 3 4 5 6	Youth T-shirt size: XS S ML XL
Ethnicity (optional): <input type="checkbox"/> African-American <input type="checkbox"/> Asian-American <input type="checkbox"/> Caucasian <input type="checkbox"/> Latino/Hispanic <input type="checkbox"/> Native American		
<input type="checkbox"/> Other, please state _____		
Parent(s)/Guardian(s) Name: _____		
Day Phone : _____	Evening Phone: _____	Mobile: _____
Address: _____	City: _____	IL Zip: _____
Emergency Contact: _____	Phone _____	
E-mail Address(es): _____	Alternate: _____	
All known food and/or drug allergies: _____		
Any medical conditions of which we should be aware: _____		
<i>Please include any medical papers necessary in case of emergency</i>		
Any medications your child will be taking while in our care: _____		
<i>Non-prescription medication and prescription medication must be signed in during registration.</i>		

### How did you hear about our camp? (Check One)

- Newspaper  The Cambridge School Web site  South Side Parents  CPS  Friend \_\_\_\_\_
- Newspaper \_\_\_\_\_  Radio Station: \_\_\_\_\_  Church  Other: \_\_\_\_\_

Make Checks Payable to **CAMBRIDGE CAMP.**

<b>Office Use Only:</b>
Check No: _____
Date Paid: _____
Amount Paid: _____
Amount Owed: _____

# CAMBRIDGE CAMP Summer Program

## WAIVER/RELEASE

I, \_\_\_\_\_, as parent of \_\_\_\_\_, desire my child to participate in activities provided by The Cambridge School from \_\_\_\_\_, 2010 until \_\_\_\_\_, 2010 (indicate dates) and agree to the terms below:

**1. Acknowledgment and Assumption of Risks:** I understand and accept the nature of physical demands of the activities. I understand that the physical demands of such activities, as well as the activities themselves, may result in injury to my child, and that such injury may be severe. I have made The Cambridge School, and/or *Cambridge Camp* aware of any and all medical and physical conditions that may affect my child's participation. I understand that The Cambridge School and Cambridge Camp staffs employ reasonable procedures, but that unforeseen circumstances or accidental events may occur, for which The Cambridge School/Cambridge Camp, its Board of Directors, representatives, volunteers, and employees cannot be held responsible.

**2. Release:** I, acting in my individual capacity and in the capacity as my child's parent, unconditionally waive and release The Cambridge School, St. James UMC (as landlord), Cambridge Camp, its Board of Directors, representatives, volunteers, and employees, and agree to hold said persons harmless from any and all claims, rights, or causes of action which may be or could be asserted against The Cambridge School, Cambridge Camp, its Board of Directors, representatives, volunteers, and employees as the result of any physical injuries, disfigurement, medical expenses, property damage, loss of earnings, mental anguish, or loss of consortium which may occur as a direct or indirect result of my or my child's use of the services, facilities, instruction, or premises of The Cambridge School, or as a direct or indirect result of my child's participation in activities provided by The Cambridge School or Cambridge Camp's, or from any conduct on the part of The Cambridge School, administration or Cambridge Camp's, including any act or failure to act. Additionally, to the extent allowed by the law, I release The Cambridge School, Cambridge Camp, its Board of Directors, coaches, and representatives, volunteers, and employees, and agree to hold said persons harmless from any and all claims, rights, or causes of action that my child could assert against The Cambridge School, Cambridge Camp, its Board of Directors, representatives, volunteers, and employees as the result of any physical injuries, disfigurement, medical expenses, property damage, loss of earnings, mental anguish, or loss of consortium which may occur as a direct or indirect result of the use of the services, facilities, instruction, or premises of The Cambridge School, or as a direct or indirect result of my child's participation in activities provided by The Cambridge School.

**3. Medical Authorization and Agreement to Pay Medical Bills:** In the event that my child becomes ill or injured during these activities, and I cannot be reached, The Cambridge School and Cambridge Camp is authorized by me to provide first aid and to take my child to a hospital of its choice for emergency care unless I have indicated otherwise below. If there are any medical or other restrictions, I have indicated these below. Regardless of the cause of injury, I agree to be financially responsible for any medical treatment, emergency care, transportation, or other expense related to medical care for me or my child, and I also agree that The Cambridge School and Cambridge Camp are not and will not be financially responsible for any emergency care, doctor's treatment, hospitalization, transportation, or other expense related to medical care for me or my child that arises out of activity provided by The Cambridge School or Cambridge Camp.

**4. Publicity:** I understand that as part of Cambridge Camp, my child may be videotaped, audio taped, interviewed, and/or photographed and agree to allow Cambridge Camp to keep, as their property, the products of such videotaping, audio taping, interviewing, and /or photographing. I also understand that such may be used by Cambridge Camp for publication in a variety of forums including Cambridge Camp newsletter, website, and other publications, and that no compensation will be paid for such use.

**5. Consideration:** I hereby acknowledge the validity and adequacy of the consideration for this release being the offering and provision of Cambridge Camp.

**6. Binding Effect:** This agreement is binding upon me and my spouse, heirs, assigns, dependents, personal representatives, attorneys, and estates. To the extent allowed by law, this agreement is also binding upon my child or children on whose behalf it is executed and upon any legal guardian thereof.

**7. Entire Agreement:** This document constitutes the entire agreement between The Cambridge School/Cambridge Camp, the undersigned, and his or her child regarding the subjects covered hereby. All previous agreements, oral or written, are superseded, and there exist no further oral or written representatives, promises, assurances, or statements of any kind affecting this agreement except those which are expressly set forth in this document. I represent and warrant that I am duly authorized to act on behalf of my child in entering this agreement as either parent or legal guardian. Furthermore, if any portion of this agreement is determined to be invalid, it is agreed that the remaining balance of the agreement shall, notwithstanding, continue in full legal force and effect.

My Child's Medical Restrictions (if any): \_\_\_\_\_

Hospital Preference (optional): \_\_\_\_\_

**AGREEMENT IS ACKNOWLEDGED BY SIGNATURE BELOW:**

Authorized parent's signature \_\_\_\_\_

Signed this \_\_\_\_ day of \_\_\_\_\_, 201\_\_\_\_  
(date) (month) (year)

## **CAMBRIDGE CAMP** Summer Program

### HELPFUL INFORMATION

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**Registration form, payment contract, and first payment  
must be received by May 15th 2010.**

**Subsequent payments are due by June 15<sup>th</sup> and July 15<sup>th</sup>.**

Space is limited, so do not delay!

Mail or drop forms off to:  
**Cambridge Camp at The Cambridge School**  
4611 South Ellis Avenue  
Chicago, Illinois 60653

**Make Checks Payable to CAMBRIDGE CAMP.**

Call 773-924-1200 or E-mail [info@cambridgechicago.com](mailto:info@cambridgechicago.com) if you have questions.  
Financial Assistance packages available at [factstuitionaid.com](http://factstuitionaid.com)!

Camps that do not fill are subject to cancellation.

Camp student-to-counselor ratio is 10:1. All counselors are camp certified.

Camp location may change. If a camp location is changed and this poses an inconvenience, prior notice will be provided and an opportunity for a refund (less the non-refundable \$75) will be provided after the summer session has concluded.

Cambridge Camp has daily and field trip uniforms, available for purchase at The Cambridge School or at Cambridge Camp orientation.

Weekly field trips require an additional fee ranging from \$3 - \$10 per trip. Field trips require an additional release/waiver. All field trips are conducted during camp hours.



# Cambridge Camp

*Never-ending fun and learning!*

## ENROLLMENT AGREEMENT

When a child is offered a place in Cambridge Camp, the parents or guardians signify their acceptance of that place by signing and returning this Enrollment Agreement, agreeing to pay full tuition for nine-week summer camp program. When families enroll students in Cambridge Camp they do so with the understanding that, barring expulsion of the child for incorrigible behavior, the Camp will provide a place for the student for the entire summer. Just as Cambridge Camp makes a commitment to the family we ask that the family make a commitment to Cambridge Camp.

## TUITION REFUND POLICY

Families who withdraw student(s) from Cambridge Camp are eligible for a tuition refund if any of the following stipulations are fully met.

1. The family is withdrawing a student due to an unexpected financial hardship, such as job loss, unexpected major medical expense, and/or death of head of household. In such case, the family will first seek application for addition tuition assistance. If Cambridge Camp is unable to meet the request, then an application for tuition refund will be considered based on the evidence provided of financial hardship.
2. The family is withdrawing a student in a class where there is a waiting list and another family accepts the opening and pays the enrollment fee plus first month's non-discounted tuition within one (1) week of the announcement to vacate. Tuition refund will be prorated based on the number of days remaining in the summer.

In all other circumstances, including early withdrawal or expulsion, tuition is non-refundable.

I intend that my child (or children) \_\_\_\_\_ attend(s) Cambridge Camp for the Summer 2010 and understand that I am obligated to pay my portion of the summer's tuition in three monthly installments directly to The Cambridge School using a personal check or money order. My portion is equal to the total tuition minus any financial aid awarded.

I have read, understood, and agreed to the statements found in this Agreement, including the policy regarding tuition remission. This is a binding legal agreement between The Cambridge School and Responsible Party. I further understand that I am responsible for attorney fees, court costs, and debt collection fees incurred by The Cambridge School if debt collection is necessary.

\_\_\_\_\_  
Signature of Responsible Party

\_\_\_\_\_  
Date

Authorized Signature \_\_\_\_\_ Date: \_\_\_\_\_