



Camps Airy & Louise Save-A-Spot Application

5750 Park Heights Ave, Suite 306, Baltimore, Maryland 21215 Phone: 410-466-9010 Fax: 410-466-0560 Camp E-mail: airlou@airylouise.org
Enrollment is open to Jewish children entering grades 2 - 9 in FALL 2015.

Step 1

Fill Out

Enter Your Camper's Name:

Last Name First Name Nickname

Step 2

Fill Out

Choose Your Camp

- Camp Airy for Boys
 Camp Louise for Girls

Step 3

Fill Out

Choose Your "ALL INCLUSIVE" Session: Check the Circle

- LONG** Grades 2-9
 Session 1L: LONG Sun. 6/21 - Fri. 7/17 **\$5050**
 Session 2L: LONG Mon. 7/20 - Sun. 8/09 **\$4150**

- SHORT** Grades 2-9
 Session 1S: SHORT Sun. 6/21 - Fri. 7/3 **\$2900**
 Session 2S: SHORT Sun. 7/5 - Fri. 7/17 **\$2900**

- ROOKIE**
 Session 1R: ROOKIE Mon. 7/20 - Sun. 7/26 **\$800***
 Session 2R: ROOKIE Mon. 7/27 - Sun. 8/2 **\$800***

*Grades 2-3. Rookies may only attend this session for 1 summer

June							July							August						
Su	M	Tu	W	Th	F	Sa	Su	M	Tu	W	Th	F	Sa	Su	M	Tu	W	Th	F	Sa
	1	2	3	4	5	6			1	2	3	4							1	
7	8	9	10	11	12	13	5	6	7	8	9	10	11	2	3	4	5	6	7	8
14	15	16	17	18	19	20	12	13	14	15	16	17	18	9	10	11	12	13	14	15
21	22	23	24	25	26	27	19	20	21	22	23	24	25	16	17	18	19	20	21	22
28	29	30					26	27	28	29	30	31		23	24	25	26	27	28	29
														30	31					



Step 4

Read It

All In-Camp & Cross Camp Costs Included.

Fee includes laundry, excess medical insurance, canteen, arts&crafts supplies, paint ball, go-carts, AiryLou activities and spending money, and camp t-shirt. Some activities have age and skill requirements. **Add-on experiences, such as Water Trips, Louise NY Trip, and Airy Racing School are subject to additional fees.**

Step 5

Fill Out

Enter Your Session Fee

\$,

Enter Your Deposit Here. (only applies if you DON'T PAY IN FULL)

In order to obtain specific discounts, make sure you meet the deadlines set forth in our promotional sheets

/ /
Deposit Date

Deposit

- ,

Balance

\$,

Yes, I am eligible for either the \$1000 \$750 \$500 Incentive - There are eligibility requirements. LIMITED SPACES - first come, first served. See flyer for details.

Personal Check:
Make checks payable to:
Camp Airy or Camp Louise
5750 Park Heights Ave, Suite 306
Baltimore, MD 21215

Credit Card:
 VISA Amex / /
Expiration Date CW2 Number Card Number
 MasterCard

Full Name of Card Holder Billing Address/Zip Code

TERMS OF ENROLLMENT (Please Read Carefully)

Please fill out both sides of this application

- In accepting enrollment, the Camp reserves a place for the camper. If, for any reason, the enrollment must be cancelled, the Camp must be advised of this in writing with the following understanding: After 4/1/2015, full payment is required for enrollment. All monies are refundable until 4/1/2015. Any cancellation after 4/1/15 will incur a \$500 fee. Any cancellation after 5/1/15 will incur a \$1500 fee. Cancellations made after 6/1/15 are non-refundable. For those paying by credit card ONLY: Cancellations made after 12/31/14 will incur an additional \$60 credit card fee.
- The Camp is not responsible for the Camper's equipment or personal belongings--while in transit or at Camp, if lost or damaged by fire, theft, laundry or in any other manner.
- It is clearly understood that this application is accepted subject to a physical examination by a physician within 1 year of arrival at camp. Camp is herein authorized to contact the authorized physician or any other medical professional prior to recreational and/or Camp placements to gather information.
- It is expressly understood and agreed that if the Camper leaves the Campus without the express permission of the Camp Director, if the Camper damages or defaces Camp property, or if the Camper's conduct or influence is not in the best interest of the Camp, the Camper may be dismissed at the sole discretion of the director with no refund nor reduction of fee. The Camper agrees not to smoke or possess cigarettes, drugs or alcohol while enrolled in Camp.
- In case of late arrival, dismissal, or withdrawal of the camper for ANY reason whatsoever, there will be no refund for Camp fees for the time reserved. In the event the camper is sent home because of illness or accident and upon orders of the Camp physician, a refund for entire weeks which coincide with regular session dates will be given. No refund will be made for partial weeks.
- Camp reserves the right and responsibility to place Campers according to grade-level and session enrolled as well as readiness standards.
- Camp is herein authorized to use analog and/or digital photographic, audio and/or video reproductions of the camper electronically and in literature for interpretive and marketing purposes, advertising, social media and to participate in research studies by the Camp.
- I hereby give permission for my camper to leave the Camp grounds for Camp programs.
- I hereby give permission for my camper to participate in any and all Camp activities both on and off Camp grounds. I fully understand that some of the activities may include certain inherent risks and additional costs.
- Binding Arbitration: I agree that any dispute concerning, relating, arising out of or referring to the subject matter of this contract shall be resolved exclusively by binding arbitration in Frederick County or Washington County, MD according to the then existing commercial rules of the American Arbitration Association and the substantive laws of that state unless Camp, in its sole discretion, selects a different forum. The arbitrator and not any federal, state or local court or agency shall have exclusive authority to resolve any dispute relating to the interpretation, applicability, enforceability, conscionability, or formation of this contract, including but not limited to any claim that all or any part of this contract is void or violable.
- When you provide a check as payment, you authorize us either to use the information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction.
- IN CASE OF SURGICAL OR MEDICAL EMERGENCY, I hereby give permission to the physician selected by the Camp Director or representative to hospitalize, secure proper treatment for, and order injections, anesthesia or surgery for the camper named above. Every effort will be made by the Camp Administration to immediately contact the me in the event of an emergency.

I understand that my camper's acceptance is not official until written confirmation is received from camp. I have read and understand all the above terms and those terms described on the reverse side of the application. I will refer to the Pick-up Day promotion sheet for required deposits and due dates. This application CANNOT BE PROCESSED UNLESS SIGNED BY PARENT/GUARDIAN.

Signature of Parent/Guardian

Relationship

Date



Camper's Full Name

Step 1

Last Name First Name Middle Name

Step 2

Address

Number & Street Name City State ZIP

Step 3

Contact Information

() _____
Home Phone

2015 will be my camper's _____ summer at Camp Airy or Camp Louise

Step 4

Descriptive Information

Date of Birth

Male
 Female
Gender

Entering Grade in 2015

Does your camper have any siblings at Camp?

Names of siblings

Step 5

Airy/Louise Directory

Camper's E-mail Address

Opt Out

Step 6

Parental/Guardian Information

Parent/Guardian

Full Name Relationship to Camper: Parent, Stepparent, Grandparent, Guardian...

Address () _____
Work Phone
() _____ () _____
Cell Phone Home Number E-mail Address

Parent/Guardian

Full Name Relationship to Camper: Parent, Stepparent, Grandparent, Guardian...

Address () _____
Work Phone
() _____ () _____
Cell Phone Home Number E-mail Address

Step 7

Parent's Relationship

Married Separated Divorced Widowed Single

Full name of person responsible for payment. _____
Full Name

EMERGENCY

Your emergency contact must be available to come to Camp if necessary. These contacts should be someone other than parents/guardian listed.

Emergency Contact #1 Relationship to Camper () _____
Phone Number

Emergency Contact #2 Relationship to Camper () _____
Phone Number

School

Name of School _____
Town

Verification

Please place your initials to the left after double-checking the information you've provided on this form. Thank You.

Official Use Only:

Promo Code

Initial Here