



477 Ocean Avenue, East Rockaway, New York 11518  
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 E-mail: RollingRiv@aol.com

**ENROLLMENT CONTRACT 2010**

Child's Name (LAST) \_\_\_\_\_ (FIRST) \_\_\_\_\_ (MIDDLE) \_\_\_\_\_ ( ) Male ( ) Female  
 (check one)

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth ( ) ( ) ( ) School Attended in 2009-10 \_\_\_\_\_ **School Grade as of Sept 2010 (next year!) \_\_\_\_\_**  
 Month Day Year

Camp Attended in 2009 \_\_\_\_\_ # of years at Rolling River (include upcoming year) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Home # \_\_\_\_\_ Bus. # \_\_\_\_\_

Home Address \_\_\_\_\_ Cell # \_\_\_\_\_  
 (If different from camper, otherwise, please leave blank)

Father's Name \_\_\_\_\_ Home # \_\_\_\_\_ Bus. # \_\_\_\_\_

Home Address \_\_\_\_\_ Cell # \_\_\_\_\_  
 (If different from camper, otherwise, please leave blank)

Parents' Marital Status \_\_\_\_\_ Parent's E-mail \_\_\_\_\_ Child's E-mail \_\_\_\_\_

**TUITION SCHEDULES FOR 2010 DAY CAMP SEASON**

*Use Your Child's Grade as of Sept. 2010*

	<u>Captain's Rate</u> <u>Before 3/27/10</u>	<u>Final Rate</u> <u>After 3/27/10</u>
<b>CHECK ONE</b>		
<b><u>MARINER DIVISION ONLY (Grades 1-4 for 5 Full Days)</u></b>		
( ) 8 weeks	\$5200	\$5400
( ) 4 weeks (6/29/10 - 7/26/10 <i>or</i> 7/27/10 - 8/20/10) Circle One	3100	3200
<b><u>NAVIGATOR DIVISION ONLY (Grades 5-8 for 5 Full Days)</u></b>		
( ) 8 weeks	\$5500	\$5700
( ) 4 weeks (6/29/10 - 7/26/10 <i>or</i> 7/27/10 - 8/20/10) Circle One	3300	3400
<b><u>CIT PROGRAM (Grades 9 &amp; 10 for 5 Full Days)</u></b>		
( ) 8 weeks	\$5000	\$5200
( ) 4 weeks (6/29/10 - 7/26/10 <i>or</i> 7/27/10 - 8/20/10) Circle One	3100	3200
<b>Overnight trips for Mariner &amp; Navigator Divisions and CIT's are optional. Additional charge for overnight trips.</b>		
<b><u>SKIPPER DIVISION ONLY (3 Year Olds to Kindergarten for 5 Full Days)</u></b>		
( ) 8 weeks	\$4800	\$5000
( ) 4 weeks (6/29/10 - 7/26/10 <i>or</i> 7/27/10 - 8/20/10) Circle One	2900	3000
<b><u>3/4 Day Program (9:00 a.m. to 2:15 p.m. or 10:45 a.m. to 4:00 p.m.) for 5 Days Per Week OR 3 Full Days Per Week</u></b>		
( ) 8 weeks	\$4400	\$4600
( ) 4 weeks (6/29/10 - 7/26/10 <i>or</i> 7/27/10 - 8/20/10) Circle One	2700	2800
<b><u>1/2 Day for 5 Days Per Week/9 a.m. to 1 p.m. with Parent Pickup (3 Year Olds &amp; Pre K Ages Only)</u></b>		
( ) 8 weeks	\$3100	\$3300
( ) 4 weeks (6/29/10 - 7/26/10 <i>or</i> 7/27/10 - 8/20/10) Circle One	2100	2200

**SPECIAL DISCOUNTS FOR EARLY FULL PAYMENT:**

For full payment by October 31, 2009 - deduct \$200 (8 week, full 5 day camper programs)  
 deduct \$100 (4 week, full 5 day camper programs)  
 Full payment for part-time Skipper programs are discounted at a different rate.

**A \$600 DEPOSIT MUST ACCOMPANY THIS ENROLLMENT CONTRACT. \$300 OF THE DEPOSIT IS A NON-REFUNDABLE SERVICE CHARGE.** A second payment of \$600 is due on November 14, 2009. A third payment of \$600 is due on February 1, 2010. Failure to make the 2nd or 3rd payments by the due dates will result in a \$200 additional charge. \$900 of the deposit is non-refundable after March 1, 2010. A request for cancellation must be made in writing. A deposit cannot be applied to a different camper's tuition upon cancellation. Full tuition for discounted rates is payable by March 27, 2010. If balance is not paid in full by March 27, 2010, the family will be billed an additional \$200 per month until bill is paid in full. Entire tuition is non-refundable after May 1, 2010.  
**SIX WEEK TUITION RATE IS \$400 LESS THAN THE 8 WEEK RATE.** Sibling discount: \$100 deducted for 2nd child enrolled for 8 weeks: \$200 deducted for 3rd child (4th, etc.) enrolled for 8 weeks (4 or 6 week campers and part-time Skipper division discounts are pro-rated). For no bus transportation, deduct \$100 for AM trip and \$100 for PM trip for an 8 week program (\$50 off each way for 4 week program). Any 4 week split session that is different from the 1st and 2nd monthly sessions will incur an additional \$200 transportation fee. Any changes to a shorter program made after May 1, 2010 will incur a \$100 service fee.

**PLEASE NOTE.....WE DO NOT ACCEPT CREDIT CARDS.**

THIS CONTRACT INCLUDES ADDITIONAL INFORMATION ON REVERSE SIDE AND CANNOT BE ALTERED OR CHANGED IN ANY WAY BY THE SIGNING FAMILY. I UNDERSTAND AND WILL ABIDE BY ALL OF THE RULES OF THIS CONTRACT.

Parent/Guardian Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_  
 (Parent/Guardian signing contract has full authority to do so and will be responsible for payment of all camp fees).

EMERGENCY CONTACTS (other than parents, who are available for pickup)

Name	Relationship to Child	Telephone Number
1. _____	_____	_____
2. _____	_____	_____

**GROUP REQUEST:** I would like my child to be in the same group as: (one name only) \_\_\_\_\_

This **MUST** be agreeable to all families concerned and does not exceed the limit of the group size. The camp reserves the right to place the child in the group suited for the child and camp. **NO GROUP CHANGE WILL BE MADE AFTER MAY 15, 2010.** It is understood that the children are the same age and grade and that the request is mutual.

**DO NOT ASSUME YOUR CHILD'S PLACEMENT...PLEASE REQUEST ONE NAME ONLY.**

Physician \_\_\_\_\_ Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Physician's Telephone # \_\_\_\_\_ Physician's Fax # \_\_\_\_\_

Allergy (specify) \_\_\_\_\_ Dietary Restrictions (if any) \_\_\_\_\_

**OTHER IMPORTANT INFORMATION—PLEASE READ CAREFULLY**

1. The signator authorizes Rolling River Day School & Camp Inc. (heretofore known as "RRDC") to administer prescribed medications, to obtain through a physician, licensed nurse or other emergency personnel of its choice, such medical care and/or first aid as is necessary for welfare of the child if any injury or illness occurs in camp, on a camp trip or going to and from camp.
  2. The signator gives permission for the child to participate in all on campus and out of camp activities, including intercamp games and off campus swimming. I understand that part of the experience involves activities and group interactions that may be new to my child, and that they come with uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of my child. I realize that no environment is risk-free, and so I have instructed my child on the importance of abiding by RRDC's rules, and my child and I both agree that he or she is familiar with these rules and will obey them.
  3. RRDC reserves the right to dismiss any camper whose conduct or behavior, in the opinion of RRDC, is harmful to the best interests of RRDC with no refund of tuition upon dismissal from camp.
  4. The signator understands that RRDC will determine the appropriate vehicle to be used to transport your child to and from camp in accordance with N.Y. State Department of Transportation.
  5. The signator understands that camp shirts must be worn in camp each day and will pay for new shirts given to children who are not wearing camp shirts on a given day.
  6. The signator permits RRDC to publish individual or group pictures and written or verbal testimonials for publicity, display, camp brochure, website, internet, advertising or camp video/DVD promotions.
  7. The signator and child agree to adhere to all of the policies, rules and regulations and information in all handbooks, addendums and contracts of RRDC. Campers and CITS may not have cell phones on camp grounds or out of camp trips. No digital cameras may be used on camp grounds.
  8. All medications must go to RRDC Health Center. Possession of or the unlawful use of non-medically prescribed drugs or alcoholic beverages or the possession of weapons shall be reason for immediate dismissal of camper with no refund of tuition. Directors will also contact the appropriate law enforcement agencies.
  9. No refunds for any reason (i.e. absences, withdrawals, changes, terminations) will be made. Entire tuition must be paid by May 1, 2010, and is non-refundable after that date.
  10. Payment plans start no later than December 1, 2009 and end by May 1, 2010. Any tuition that is not paid in full by May 1, 2010 will be billed at final tuition rate posted for your child's program.
  11. Tuition includes transportation, lunch, snack, towels, two camp shirts, DVD yearbook and "memory mate" camper photos.
  12. Rolling River Day Camp is licensed by the NYS Department of Health and is inspected twice yearly. Copies of the inspections are kept on file at the Nassau County Department of Health, 106 Charles Lindbergh Blvd., Uniondale, NY 11553
- ROLLING RIVER IS A MEMBER OF AND ACCREDITED BY THE AMERICAN CAMP ASSOCIATION.**

FAMILY WHO REFERRED YOU TO ROLLING RIVER DAY CAMP (one name only) \_\_\_\_\_

*Referring family/person must be listed above at time of enrollment*

**2010 Camp Season:** Tuesday, June 29 to Friday, August 20 (closed Monday July 5th )

**First 4 week session:** Tuesday June 29 - Monday July 26, 2010 or **Second 4 week session:** Tuesday July 27 - Friday August 20, 2010

<b>FOR OFFICE USE ONLY (Please do not write below this line)</b>						
Tuition _____	Deposit _____	Balance _____	Card _____	Packet _____	Group # _____	
Discount _____	Program:	8 Week ( )	4 Week ( )	Other ( )	# of Weeks ( )	
Sibling _____	Days:	Full Day ( )	3/4 Day ( )	1/2 Day ( )	3 Day ( )	
No Transport. _____	Division:	Skipper ( )	Mariner ( )	Navigator ( )	CIT ( )	
Total Tuition _____	Administrative Approval _____			Date _____		

Check here for NO TRANSPORTATION NEEDED

Check here if parent is on Rolling River Staff. Rolling River staff parents do not receive bus transportation unless the parent drives an AM/PM bus.

TRANSPORTATION

(To Be Completed by Parent)

PLEASE **PRINT** INFORMATION BELOW

Child's Name \_\_\_\_\_  
(Last Name) (First Name)

Address \_\_\_\_\_

Town \_\_\_\_\_

Home Tel. # \_\_\_\_\_ Cell # \_\_\_\_\_ Email \_\_\_\_\_

Nearest Two Cross Streets \_\_\_\_\_

Do you have a different address for pickup and drop-off? YES or NO

If yes, give details on back of this card.

**WE WILL TRY TO HONOR SPECIAL REQUESTS MADE IN WRITING ONLY.**

**WE CANNOT GUARANTEE SPECIFIC BUS PICK-UP OR DROP-OFF TIMES.**

- For working parents there are extended day hours before and after camp.
- You may only give one address for pick-up and one address for drop-off.
- The address given must be the same every day of the week.

Session	_____
Days/Dates	_____
For Office Use	
Vehicle #	_____ Pin# _____