

BEST Camp Inc. – Quick Pre-Registration
 3470 N. 54th Street Milwaukee, WI 53216 – 414-444-6535
 PLEASE FILL IN ALL FIELDS

Family Name: _____ Home Phone _____
 Mother's Name: _____ Cell Phone _____
 Father's Name: _____ Cell Phone _____
 Address: _____
 E-mail Mother _____ E-mail Father _____

*Non-Parent Emergency Contact _____ Phone _____
 Emergency Contact Address _____ Cell Phone _____
 Doctor's Name _____ Phone _____
 Doctor's Address _____

Child #1 _____ DOB _____ Current Grade _____
 Allergies/Medical Concerns: _____

Please mark the session:
 June 26 - July 16 (1st session)
 July 17 – August 6 (2nd session)
 June 26-August 6 (Both sessions)

Child #2 _____ DOB _____ Current Grade _____
 Allergies/Medical Concerns: _____

Please mark the session:
 June 26 - July 16 (1st session)
 July 17 – August 6 (2nd session)
 June 26-August 6 (Both sessions)

Child #3 _____ DOB _____ Current Grade _____
 Allergies/Medical Concerns: _____

Please mark the session:
 June 26 - July 16 (1st session)
 July 17 – August 6 (2nd session)
 June 26-August 6 (Both sessions)

Tuition:

<u>Earlybird Registration</u>	Application, \$100 reg. fee, and trip fees by May 26; Full payment by June 1
One Session	\$100 non-refundable application fee <u>plus</u> \$350 tuition (\$15 trip fee)
Full Summer	\$100 non-refundable application fee <u>plus</u> \$699 tuition (\$25 trip fee)
Out-of-town Residents	\$150 per week (\$5 trip fee)
<u>Regular Registration</u>	Application and full payment by June 15
One Session	\$100 non-refundable application fee <u>plus</u> \$399 tuition (\$15 trip fee)
Full Summer	\$100 non-refundable application fee <u>plus</u> \$799 tuition (\$25 trip fee)
Out-of-town Residents	\$165 per week (\$5 trip fee)

Check here if you need a scholarship form. Please indicate at least 2 preferences as a volunteer.
 Arts and Crafts Baking Music Fieldtrip Driver Photography
 Girls' Shiur

*Prior to June 1, a full tuition refund is granted (minus the \$100 application fee).
 - Parental authorization is assumed for the use of photographs and videos of campers in BEST Camp Inc's promotional literature, materials, video etc. – Parental authorization is assumed for participation in and for transportation on fieldtrips. I/We have read the BEST Camp Inc. enrollment information and policies and accept financial responsibility for this camper.
 -I/We furthermore give permission to the medical personnel selected by the camp director to order x-rays, routine tests, and necessary transportation for my/our child. In the event I/we cannot be reached in an emergency, I/we hereby give permission to the medical staff selected by the camp director to secure and administer treatment, including hospitalization, for my/our child as named above.

Parent Signature _____ Date: _____
 Parent Signature _____ Date: _____