



**2012
ENROLLMENT FORM**

- full
- 4-week
- 1-week

DATE _____ CAMPER'S NAME _____ SESSION: _____

DATE OF BIRTH _____ GRADE IN 2012/13 ACADEMIC YEAR _____

NAMES OF PARENTS/GUARDIANS AT CAMPER'S HOME ADDRESS _____

STREET _____ CITY _____ STATE _____ ZIP _____

PHONES _____

E-MAILS _____

NAMES OF PARENTS/GUARDIANS AT ANOTHER HOME ADDRESS _____

STREET _____ CITY _____ STATE _____ ZIP _____

PHONES _____

E-MAILS _____

EMERGENCY CONTACT NAME _____ RELATIONSHIP _____

EMERGENCY TEL _____ CELL _____ OTHER _____

\$2500 due with enrollment form (\$500 for the 1-week program)

mail to Camp Scatico, POB 6, Elizaville NY 12523

See reverse for fees, dates, and other important information

Your signature below confirms that you have read and agree to the terms of the enrollment contract

Signature of Parent or Guardian _____ Date _____

Camper tuition includes all camp activities, including day trips (transportation and activity admissions), canteen, and laundry service. The camp reserves the right to offer other programs or services to families on an individual basis for an additional fee.

Tuition per camper	Full Session	June 26 – August 14	\$8700 for campers entering 7th grade and younger \$9100 for campers entering 8th grade and older \$700 trip fee for graduating campers only (Soopers & Upper Seniors)
	4-week Session	June 26 – July 22	\$5800 for campers entering 5th grade and younger
	1-week Session	July 22 – July 28	\$1000 for campers entering 3rd grade and younger

Payment schedule per camper
 \$2500 deposit with enrollment form (\$500 deposit for the 1-week program)
 Additional \$2500 due Feb 1
 Balance due June 1

Enrollment discounts apply only for full session campers/CITs and only if paid in full by June 1
 \$700 discount for first-time campers with a \$2500 deposit by August 13
 \$500 discount with a \$2500 deposit by October 1
 \$2000 additional discount per family enrolling 3 campers

Refund Policy

Deposits are fully refundable until April 1. Cancellations between April 1 and Opening Day are subject to a \$500 fee.

Late arrivals and early departures must be arranged beforehand and are pro-rated at the discretion of the camp, subject to an \$800 deductible. There will be no tuition refund allowed if a camper is sent home because of actions which threaten or are detrimental to the camp community (this includes any camper use of illegal drugs, alcohol, or cigarettes; if a camper is out of his cabin at night or leaves camp grounds without supervision; or if a camper physically, emotionally, or verbally abuses any member of the community).

A signed enrollment form provides the camp:

- Permission to allow photographs, videotapes, and interviews in which your camper may appear to be taken during the camping session and consent to publish and use these to illustrate, report, promote and advertise the camp. Use of any such photographs, videotapes, or interviews may include, but is not limited to, use of these on Internet web sites promoting or reporting on the camp.
- Medical Authorization: to provide for your camper routine health care, administer prescription and over-the-counter medications, and seek medical treatment, including ordering x-rays or routine tests; to release any records necessary for treatment, referral, billing, or insurance purposes and to provide or arrange necessary transportation for the camper; for any physician, nurse, or other health care provider to communicate with the medical staff and director about the camper’s medical condition, treatment, and/or prognosis; for the camp’s medical staff to discuss any medical condition with the director or the camper’s counselor when the medical staff believes such communication to be in the best interest of the child; for a physician selected by the camp director to secure and administer emergency treatment, including hospitalization, for the camper, in the event that none of the emergency contacts can be reached.
- Your acknowledgement that the camping experience involves activities and group living arrangements and interactions that may be new to your child and that they come with certain risks and uncertainties beyond what the child may be used to dealing with at home. You assume these risks on behalf of your child and have instructed him/her on the importance of abiding by the camp’s rules and regulations set for the health, safety, and welfare of the children at camp.
- Your acknowledgement that clothes and personal belongings, including sports equipment, will be stored and handled at the camp's discretion to ensure safety. The camp is not responsible for loss or damage to these items. Please do not allow campers to bring unnecessary or expensive items to camp.
- The permission to participate in camp activities, a sampling of which follows, and to leave camp premises for camp activities. Restrictions to any activities need to be noted on the confidential and medical forms.

Athletics (team sports, including baseball, basketball, lacrosse, frisbee, dodge ball, gaga, hockey, basketball, soccer, and football)

Archery	Diving	Music	Riflery	Weightlifting
Boating	Dramatics	Nature	Sailing	Woodworking
Ceramics	Golf	Orienteering	Soccer	
Climbing/Tower	Gymnastics	Photography	Swimming	
Crafts	Martial Arts	Pioneering	Tennis	
Dance	Mountainboarding	Radio	Videography	

It is agreed 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 New York, according to the then existing commercial rules of the American Arbitration Association and the substantive laws of that state. 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.

Camp Scatico operates under a permit from the New York State Department of Health and is inspected twice annually. Copies of inspection reports can be obtained by writing the Columbia County Department of Health, 325 Columbia Street, Hudson NY 12534.