



Senior Summer Camp 2012

Monday July 9– Sunday July 22, 2012

Registration Form

Space is limited, please fill out and mail this completed form, with your \$100 deposit **by April 1, 2012.**
Senior Camp

Isabella Freedman Jewish Retreat Center
116 Johnson Rd
Falls Village, CT 06031.

IMPORTANT INFORMATION

- Meals will be served family style
- Guests must be able to walk the equivalent of three city blocks
- Guest who need assistance with mobility must bring an aide to accompany them. (10% discount for aides)
- Guests must complete a health assessment form prior to acceptance
- Isabella Freedman will provide free transportation from and to Brooklyn and Manhattan and free shuttle service from and to Bradley International Airport, Wassaic Train station and Canaan bus stop on July 9 and July 22 only. Other transportation needs will be at your own expense.

Rates

- Rates range from \$1100 to \$2400. Prices include lodging, meals, in-camp activities and transportation to and from Isabella Freedman
- Prices do not include costs for trip to local destinations

DOUBLE OCCUPANCY ROOMS	SINGLE OCCUPANCY ROOMS
Premium Double Occupancy: \$1675 Weinberg	Premium Double Occupancy: \$2450 Weinberg
Deluxe Double Occupancy: \$1550 Scheuer, May	Deluxe Double Occupancy: \$2300 Scheuer, May
Private Bath Double Occupancy: \$1395 Pine	Private Bath: \$1950 Pine
Semi-Private Bath: \$1175 Maple, Blue Heron, Cedar	Semi-Private Bath: \$1475 Maple, Blue Heron, Cedar
Shared Bath: \$1100 Elm, Kaufman, Daisy	Shared Bath Elm, Kaufman, Daisy: \$1300

There is a 10% discount per person if payment is made in full by August 31, 2011.

Cancellation Policy

All registration forms are subject to approval and a deposit of \$100 per person is required and is **non-refundable** under all circumstances.

There is an *additional* \$275 fee per person if you cancel after **May 30, 2012.**

There will be no refunds for cancellations after **July 6, 2012** for late arrivals, or for early departures. This cancellation policy applies even if the cancellation is for medical reasons.

Participant Information: Please print neatly and clearly.

LAST NAME (PLEASE PRINT) FIRST NAME SEX (M/F) NEW/RETURNING

LAST NAME (PLEASE PRINT) FIRST NAME SEX (M/F) NEW/RETURNING
(Please indicate if your husband or wife is attending, if applicable.)

ADDRESS APT # CITY STATE ZIP

TELEPHONE EMAIL

Please list dietary or other special needs:

Accommodations Selection

Name of preferred cottage: _____ Single or double occupancy: _____

Name of suggested roommate (if applicable): _____

How Are You Getting to Isabella Freedman? Please circle one choice.

Plan to Drive NYC Bus Provided by Isabella Freedman Bradley Airport Wassaic Train
Bronx Queens Bklyn Manh (Hartford, CT)

Payment Information

All registration forms are subject to approval and a deposit of \$100 per person is required and is **non-refundable** under all circumstances. Registration forms and balance must be received **by May 30, 2012** in order to insure a space in the program. Receipt of application does not ensure acceptance to the program

Please select a payment option:

- Pay by credit card.** Please charge my credit card in the amount of \$_____.
- Check here if you would like the balance to be automatically billed to your credit card on **May 30, 2012**.

Circle One: VISA Mastercard American Express
Card Number: _____ Security Code: _____ Expiration Date: _____

- Pay by check.** I have enclosed a check payable to **Isabella Freedman** in the amount of \$_____. I will send the remaining balance by **May 30, 2012**.

Your Signature: _____ Date: _____

All registration forms are subject to approval. Please send completed form with deposit to:
Senior Camp, Isabella Freedman Jewish Retreat Center, 116 Johnson Rd, Falls Village, CT 06031