

Monkey Business Camp

Summer Registration Form 2011

Three Ways to Get Forms to Us.

You choose:

1. Mail with your check made out to:
Monkey Business Camp
2880-A Sacramento Street,
Berkeley, CA 94702
2. Fax to: 510-540-4708
3. Scan and E-mail:
office@monkeybusinesscamp.com

For last minute sign ups (within 5 days of camp),
call us for instructions: 510.540.6025

Returning Camper(s) Full Name(s):

- 1.
- 2.
- 3.

New Campers –

fill out page 3 & send with registration!
We will keep on file at our office for future programs.

Donations

WE APPRECIATE YOUR GENEROSITY.

If possible, please donate to support our mission!

I'd like to contribute to the scholarship program:

\$

No amount is too small – consider adding \$5-\$25 onto
your registration. With these funds last year, we gave
out over \$2000 in scholarships thanks to your support!

I'd like to contribute to the staff training fund:

\$

No amount is too small – consider adding \$5-\$25 onto
your registration. With these funds last year, we hired a
trainer on diversity!

TALLY YOUR FEES HERE

Session Fees Due: \$

+ Scholarship Donation: \$

+ Staff Training Donation: \$

= Total Amount Due: \$

- Amount Enclosed: \$

= Remaining Balance: \$

**A \$200 deposit PER CAMP SESSION or full
payment
must be sent with registration**

If Using the Payment Plan, please see page 4.

Berkeley's Tilden Park: Ages 5-10

Basic day fees (8:30-3:30) include 7 hours of care, all arts & crafts +
project supplies, instruction in theme activities and for extended care
campers: yummy healthy organic snack.

Select Age Group:

Banana (5-6 ½) Mango (6 ½-7) Coconut (8-10)

Select

Register for One Week ONLY		
Basic Day 8:30-3:30	Add Morning 8:00-8:30	Add Afternoon 3:30-6:00
Register for 2 or more weeks		
Please note that Aug 8-19 counts as 2 weeks and cannot be split -- ie. We will not accept registrations for Aug 8-12 or Aug 15-19.		
8:30-3:30	Add AM	Add PM
If you register for a minimum of 6 Weeks – you receive FREE AM & PM Care.		
	Want Free AM Care?	Want Free PM Care?

Please keep this page for your records

Note: MBC stands for Monkey Business Camp



Policies

Monkey Business Camp tries to save trees and money! Whenever possible, we prefer to email confirmations of registration, Parent Packets Balance Due Invoices, and Receipts. If you supply us with your email address, we will use that as our first means of communicating in writing. **If an email address is not provided, we will use post mail.** Please check your email provider's spam protection to ensure that office@monkeybusinesscamp.com is a safe address and emails from us will not be blocked.

Refund Policy:

If you cancel by June 1st, you will receive an 80% refund. If you cancel 14 days in advance of your child's registered enrollment date AND we can find a replacement for your child's registration, you will receive an 80% refund. NO OTHER REFUNDS. See transfer of session's policy as alternate. For 3 day or longer absences due to illness, please submit a written request with a doctor's note to transfer to another MBC program within a month after camp ends.

Transfer/Changes in Registration:

We will transfer registration to an alternate session up to one week before a session starts, if available. A \$10 transfer fee will apply. Extended Care days may be changed once for no fee.

Age Division for Age 3-4 and 5-7 year old groups:

Meadows Site Ages 3-4: The group will be split up into smaller groups during part of the day. Indian camp Site Ages 5-7: The group meets together during part of the day and then is split during certain times of the day by ages, one group with 5-6 year olds ("Bananas"); the other with 6-7 year olds ("Mangoes"). If your child is friends with a particular child, please write their name on your reg form or contact our office, so we can make sure they get in the same group.

Confirmations:

We confirm via e-mail, phone, or post within a week of receipt of your registration. It is **IMPORTANT** to contact us if you do not receive a message within 10 days of registration. *We may not be able to admit your child to camp unless you have received a confirmation.* Make sure office@monkeybusinesscamp.com is a safe address and emails from us will not be blocked.

Payment for Drop-In Care Due Day of Service:

Fill out a slip each time you use drop-in care and leave credit card info or check payment.

Bounced Check Fee: \$25

Late Pick-Up Policy:

There is a 5 minute grace period, after which you will be charged \$10 for every 15 minutes to pay a staff member.

Dependent Care Receipts:

Receipts w/tax id number will be e-mailed the second week of June and again the first week of September. If you need a dependent care form signed, mail or fax it to our office. *On site staff cannot sign.*

Curriculum Notes:

We may alter plans slightly if there are fewer kids enrolled. We may walk to a local park to play.

Requirement to Disclose Special Needs or Behavioral Issues

Prior to, or at the time of registration, parents/guardians are responsible for notifying us of an officially diagnosed special need. Additionally, notify us if your child's school teacher has spoken to you with concerns about their disruptive behavior in a group setting. *If your child has an aide during school, s/he will need one during camp.* If your child is a return camper, we need you to update any information for our site staff at time of each camp registration to confirm that your child's participation is still possible. Your disclosures do not necessarily preclude your child's participation.

Dismissal from Camp

There are rare times when MBC must dismiss a child due to behavioral problems that preclude a child from participating safely or effectively in a group. If a camper is dismissed for aforementioned reasons, there will be no refund for the unused, pre-registered days.

Statement of Understanding and Acceptance of Policies

(by registering for a Monkey Business Camp program, you agree to the following)

I hereby certify that I have given full disclosure concerning all medical, physical, and psychological conditions which may have relevance to my child's performance while at MBC. I understand that failure to provide full disclosure is grounds for immediate dismissal without refund. I will assume the necessary financial obligations and understand and agree to abide by MBC policies and procedures.



Return this page to: Monkey Business Camp
 2880-A Sacramento Street
 Berkeley, CA 94702
 P: 510.540.6025 -- F: 510.540.4708
 Or sign, scan and e-mail to:
office@monkeybusinesscamp.com

NEW Camper Registration Form

Camper Information:

First Name: Last Name:
 Date of birth: Gender:

Sibling:

First Name: Last Name:
 Date of birth: Gender:

Parent/Guardian Info:

Parent(s)'s Name(s)
 Mailing/Billing Address City Zip
 Email Address(es)
 Home Phone Work Phone(s) Cell Phone(s)

Emergency Contact Information: *In case of emergency...*

Please list **3 names & phone numbers, including yourself**, you would like us to call in order of preference (list 1 or 2 phone #s per person and indicate if that number is Home, Cell or Work (H, C, W)).

1. Name: Relation: Phone Phone
 2. Name: Relation: Phone Phone
 3. Name: Relation: Phone Phone
PHYSICIAN: Phone: Hospital
DENTIST: Phone:

Medical/Behavioral information Include known allergies and medications. Attach additional page with desired plan of action in case of reaction :

----- **Requirement to Disclose Special Needs-read details in Policies on page 2** -----

Sign Out Information List all people authorized to pick-up your child (aside from parent/guardians and emergency contacts above):

Are you interested in sharing your contact info with families interested in carpooling?
 Current School: Where did you hear about our camp?

Indemnification Waiver (MBC =Monkey Business Camp)
 I certify that the children named are in normal health and give permission for them to participate in program activities. I hold blameless MBC and all involved in the program from any liability for any harm that befalls the child(ren) as a result of participation in the programs. I authorize the employees of MBC to consent to medical care to be rendered to said child(ren) upon the advice of a licensed physician. The undersigned further agrees that the employees of MBC are not legally or financially liable for any claim arising out of consent given in good faith in connection with such diagnosis and treatment.

Name: **Signature** (if sent by mail): **Date:**

Photo Release (MBC =Monkey Business Camp)
 I hereby grant MBC the right and permission, in connection with photos and video taken of my child, his/her artwork or written work, the following: the right to use the above items, *without the use of names*, for promotional/advertising purposes, e.g. the internet and camp fairs.

Name: **Signature** (if sent by mail): **Date:**



Payment Plan Agreement-Summer 2011

Name of Camper(s):

Camp Site(s): Papaya: Ages 3-4 Banana/Mango: Ages 5-7 Coconut: Ages 8-10

Dates of Camp:

Type of Card: Card Number: Exp.

We will process payments on the last weekday of the month. Depending on when you register, we will charge to your credit card in equal amounts throughout spring and summer, unless you specify a different schedule below. You can opt to pay deposit amount (\$150/one week sessions, \$250 for two week sessions) for initial charge and final balance on May 31^{PSTP}, which is our requirement for payment by check registration. Do not leave all payments until the end of summer. Plans must start with an initial deposit of \$50/session. Last payment must be made by or on September 30, 2011.

Total Due: \$

Please deduct according to the schedule below:

Initial Deposit on:

in the amount of \$

March 31	\$ _____
April 30	\$ _____
May 31	\$ _____
June 30	\$ _____
July 31	\$ _____
August 31	\$ _____
September 30	\$ _____

For office use only:		VT	DB
3/31	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
4/30	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
5/31	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
6/30	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
7/31	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
8/31	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
9/30	<input type="checkbox"/> initials: _____	<input type="checkbox"/>	<input type="checkbox"/>
Notes:			

Agreement to Terms of Payment Plan

I understand Monkey Business Camp will be charging my credit card as specified above. I agree to pay off my balance for my child's attendance at Monkey Business Camp. I will contact the office with any updates to my credit card information.

Name:

Signature (if sent by mail):

Date: