

EMERGENCY CONTACT INFORMATION (OTHER THAN PARENTS)

Name #1 _____ Cell Phone _____ Work Phone _____

Relationship to Camper _____

Name #2 _____ Cell Phone _____ Work Phone _____

Relationship to Camper _____

PERMISSION WAIVER

I give my child _____ permission to attend all Camp Givah programs, with the understanding that while at these programs, pictures and/or video may be taken and used for publicity purposes. I understand that while at all Camp Givah programs, my child will be expected to behave following the guidelines set by the Camp Givah Commission, Camp Givah Director and staff, and Temple Israel.

Camp Givah will not release or publish the names of any camper.

I hereby consent to Camp Givah staff to apply sunscreen, as needed, for my child. I understand that I am responsible for providing sunscreen before it can be applied to my child. I agree to apply sunscreen on my child before coming to camp and I understand that it will be reapplied later in the day.

Parent/Guardian Signature _____

SPECIAL NEEDS PROGRAM

Givah's Special Needs Program, now in its 8th year, allows campers who need extra support to experience the joy of Givah.

Is your child currently receiving any services? ___ No ___ Yes

(Circle all that apply) PT, OT, speech, behavioral, other _____

Camper's Name: _____ Gender: _____ Age: _____ Birth date: ___/___/___

Please contact us by May 1st to schedule an interview to see if Givah is a good fit for your child.

Givah is where kids find fun, friendship and Jewish values while also exploring their interests and enjoying new experiences.

Camper scholarships are available. To apply, please visit campgivah.org or contact Temple Israel at 438-7858, ext 110, prior to April 30, 2021.

Funds are provided from Temple Israel Restricted and Endowment Accounts and from scholarship funds from the Jewish Federation of Northeastern New York.