



**PLEASE ATTACH A
CURRENT PHOTO OF CAMP
APPLICANT HERE!**

Applications **will not be processed** without a current photo attached. The image of the applicant must be clear and centered in the photograph.

2012 RESIDENTIAL CAMP APPLICATION

DDD and REFERRING AGENCY INFORMATION (If applicable)	
DDD Case Manager:	DDD Case Manager Phone:
DDD Case Manager Address:	
Agency Service Coordinator:	Agency Service Coordinator Phone:
Agency Service Coordinator Address:	

APPLICANT INFORMATION		
Last Name	First Name and Middle Initial	Nickname
Birth Date:	Social Security #:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Where does applicant live? <input type="checkbox"/> Group Home/DC <input type="checkbox"/> Skill Provider <input type="checkbox"/> Family/Relative <input type="checkbox"/> Independent Living		
Applicant's Residential Address:		
Applicant's Residential Phone Number:		
Parent/Guardian Name(s):		
Parent/Guardian Address:		
Parent/Guardian Phone Number:		
Has applicant attended Camp Jaycee before? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Applicant's Camp Tuition Invoice (bill) should be mailed to:		
<input type="checkbox"/> Parent/Guardian <input type="checkbox"/> DDD Case Manager <input type="checkbox"/> Camper's Residential Address		

EMERGENCY CONTACTS			
Parent/Guardian Name:		2 nd Emergency Contact Name:	
Relationship:		Relationship:	
Home Phone:		Home Phone:	
Work Phone:		Work Phone:	
Cell Phone:		Cell Phone:	

MOBILITY/ACTIVITY AND DISABILITY INFORMATION

PLEASE NOTE: Camp Jaycee is a rustic environment best suited to campers who can move freely without restriction. While we welcome all applications, if applicant has mobility restrictions it is advisable to call the administrative office to speak with staff prior to submitting application: 732.246.2525, x22 or x44

Applicant's Mobility: **Unrestricted** **Restricted** **Uses Aid**

If applicant has restricted mobility or uses aid, please explain:

Does applicant have any Activity restrictions? **Yes** **No**

If Yes, please list all restrictions:

Please specify the nature of the applicant's disability:

Provide any information that would help us better serve applicant's needs while at camp:

Please list applicant's Interests and Hobbies:

PERSONAL / SOCIAL SKILLS (Please check one box for each skill)

Personal Skills	Support Needed			Social Skills	Difficulty		
	High Level	Moderate	Little or No		High Level	Moderate	Little or No
	Support Needed	Support Needed	Support Needed		Difficulty	Difficulty	Difficulty
Toileting:				Comprehension:			
Eating:				Sleeping:			
Dressing:				Hyperactivity:			
Washing:				Vision:			
Showering:				Hearing:			
Shaving:				Speech:			

BEHAVIORAL INFORMATION

Either Yes or No must be checked for each behavior. Leaving any behavior without an answer will result in **automatic denial** of the application.

Self-Abuse:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Violent Behavior:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Tantrums:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Tendency to run away:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Biting:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Destruction of property:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Has applicant ever displayed inappropriate sexual behavior? **Yes** **No**

If Yes, please explain in detail:

PLEASE NOTE: Camp Jaycee will not tolerate any behavior that puts other campers or staff at risk. Any incident of violent, dangerous or abusive behavior by a camper will result in that camper being sent home immediately, with no refund of camp fee.

CAMP SESSIONS

Camp Jaycee camp sessions are offered on a **First Come, First Served** basis. Please check applicant's desired camp session (and individual weeks if applicable) below:

___ Session 1	___ Week 1: June 24 – June 30, 2012 ___ Week 2: July 1 – July 7, 2012	Open to all ages
___ Session 2	___ Week 3: July 8 – July 14, 2012 ___ Week 4: July 15 – July 21, 2012	Open to all ages
___ Session 3	___ Week 5: July 22 – July 28, 2012 ___ Week 6: July 29 – August 4, 2012	Open to all ages
___ Session 4	___ Week 7: August 5 – August 11, 2012 ___ Week 8: August 12 – August 18, 2012	Open to all ages

CAMP TUITION PAYMENT AND REFUND POLICY

1. Camp tuition is \$715.00 per week (\$1430.00 per two-week session).

2. **A non-refundable \$150.00 Application Fee must accompany every camp application**, regardless of the number of weeks a camper is applying for.

3. The non-refundable \$150.00 Application Fee will be applied to the camper's total tuition bill.

4. The balance of the tuition bill must be received by the Administrative Office **no later than four (4) weeks prior to the start of camp session**. Tuition (*less \$150.00 Application Fee*) is refundable up to four (4) weeks prior to start of camp session.

5. No refunds or credits of tuition will be given for any of the following circumstances:

- Camper does not show up for scheduled camp session.
- Camper is denied admission to camp upon arrival (i.e., incomplete/inaccurate medical forms, presence of an acute medical condition, etc.).
- Camper leaves camp prior to the end of the camp session (tuition for additional sessions is only refundable in the event of illness or injury).

6. **Campers sponsored by agencies (i.e., DDD) are required to attend camp. Non-attendance by agency-sponsored campers automatically voids the agreement with the sponsoring agency, in which case payment of tuition (less the Application Fee) automatically becomes the responsibility of the camper's Parent/Guardian.**

CONSENT AND ACKNOWLEDGEMENT OF RISK

Each camper will be examined by our medical staff upon arrival at camp. The Camp reserves the right to deny admission to the scheduled session based on medical reasons and any communicable diseases. New Jersey Camp Jaycee will not be responsible for any expenses, cancellation fees, or other charges incurred by a parent/guardian or caregiver due to a camper rejection.

I (We) give my (our) consent for my (our) child to attend Camp Jaycee and engage in regular camp activities. While the Camp will take every reasonable precaution, it is agreed that the camp assumes no responsibility for the camper's personal property. I (We) further agree to give permission for the camp doctor, nurse, and hospital to treat this camper according to the medical form or in case of emergency.

1. In consideration of the right to attend and participate in the activities described above, the participant and/or guardian, if the participant is a minor or not their own guardian, hereby:
 - a) Agrees to abide by all rules and regulations established by New Jersey Camp Jaycee, Inc.
 - b) Authorizes New Jersey Camp Jaycee or any of its agents to provide, obtain, or authorize any reasonable incidental and emergency medical treatments for the camper, in the event of the camper's illness or injury, or incapacity, hereby accepts the responsibilities to pay for such treatments.
 - c) Grants to New Jersey Camp Jaycee for any purpose connected with promoting the mission and goals of New Jersey Camp Jaycee, but not for commercial exploitation, the right to use the camper's name, voice, and likeness in any writing, photographs, films, and recordings of the camper while they are participating in the activities, to use, reproduce, publish and distribute the same.
 - d) Acknowledges that there is an element of risk involved in any activity involving travel outside of ones own home, or community; and certifies that the Camper is physically, mentally and emotionally capable of attending and participating in the activities that are specifically designed for individuals with developmentally disabilities. I (We) assume all risk of and financial responsibility for any loss or injury to the Participant or others that may occur as a result of the camper's negligence or misconduct and indemnifies and holds New Jersey Camp Jaycee harmless from and against any and all costs, claims demands, charges, liabilities, obligation, judgments, executions, costs of the suit and actual attorney's fees incurred or suffered by New Jersey Camp Jaycee as a result of, or arising out of the Camper's negligence or misconduct.
2. This consent and acknowledgement of risk shall not be amended, supplemented, or abrogated without the written consent of New Jersey Camp Jaycee's Administration Office. The participant or their legal guardian has read this Consent and Acknowledgement of Risk, and understands and agrees to its contents.

PARENT/GUARDIAN SIGNATURE (Required)

I have read, I understand and I agree to comply with all the terms of the CAMP TUITION PAYMENT AND REFUND POLICY and the CONSENT AND ACKNOWLEDGEMENT OF RISK.

Parent/Guardian Signature: _____ Date: _____

Please **make a copy of this application** for your own records, and then
Mail the **completed application** and the non-refundable **\$150.00 Application Fee** to:

New Jersey Camp Jaycee
985 Livingston Avenue
North Brunswick, NJ 08902
*(Make your check payable to **Camp Jaycee**)*

If you have any questions, please contact the Camp Coordinator at **732-246-2525, x44**