

2008 CAMP INFORMATION

SESSION DATES / PAYMENT SCHEDULE

A four week stay (Sessions 1 & 2 or 2 & 3) or
Three week stay (Sessions 3 & 4) is recommended

Campers, ages 7-18, may come for 2, 4, 6, or 7 weeks.

Session 1 - June 29 thru July 11

Session 2 - July 13 thru July 25

Session 3 - July 27 thru August 8

Mini Session 4 - August 10 thru August 15

Tuition per Session: 1, 2 or 3: \$2490 - Mini Session 4: \$1195

There is a \$200 discount for each additional Session.

(\$100 discount for Mini Session 4)

There is a one time \$100 sibling discount for 2nd child

(\$50 for Mini Session 4)

Tuition includes: room & board, on-campus activities, local off-campus trips (i.e. movies, bowling, etc.), laundry, evening & bedtime snacks, etc.

'Between Session' campers have the option to either go home or participate in supervised, fun-filled weekend activities. The weekend schedule will include a Friday evening off-campus outing and a day trip on Saturday to Lake Compounce Amusement Park. There is an additional charge of \$195 for the 'Between Session' stayover which includes all meals, entrance fees and laundry.

Additional optional costs which are paid before camp begins are: bus to and from camp, pre-ordered store items and SAT course.

Doctor & emergency room visits & pharmacy bills incurred due to a camper's sickness or injury at camp are the responsibility of the camper's parents and should be paid by parent's credit card at time of service.

CHECK-IN: 2 PM SUNDAY • DEPARTURE: 1 PM FRIDAY
STAFF TIPPING IS NOT PERMITTED

\$500 deposit per session required. Completely refundable before February 1. Thereafter deposit refundable less \$300 administrative fee. Full payment is due by May 15. All applications received after May 15 must be accompanied by full payment. **ONLY FULL PAYMENT WILL GUARANTEE A PLACE IN THE CAMP.** Camp credit only for cancellations within 30 days of scheduled first day. Camp credit only at the discretion of Joel Ross Tennis & Sports Camp.

Please note: Drugs, alcoholic beverages, and cigarettes are strictly forbidden and constitute, along with general misconduct, grounds for immediate dismissal from camp without refund or credit.

Upon receipt of the application each camper will receive a full information packet including medical and personal information forms necessary for camp.

JOEL ROSS TENNIS & SPORTS CAMP

BOX 62H ■ SCARSDALE, N.Y. 10583

(914) 668-3258 • Fax (914) 723-4579

www.joelrosstennis.com • info@joelrosstennis.com

After June 20, 2008 at

Kent School • 1 Macedonia Road • Kent, CT 06757

(860) 927-6339 • Fax (860) 927-6340

JOEL ROSS Tennis & Sports Camp

Owned & operated by Joel Ross Tennis Enterprises, Inc.

SUMMER 2008
JUNE 29 thru AUGUST 15

Name _____ Male
 Female

Address _____

City _____ State _____ Zip _____

Birthday: Month _____ Day _____ Year _____
 Beginner Intermediate Advanced

First Names _____
Mother _____ Father _____

Phones _____
Home _____ Business _____

Cell Phones _____
Mother _____ Father _____

School _____ Grade as of Sept 2008 _____

Camper's e-mail Address _____

How did you hear about us? _____

SESSIONS DESIRED

1 June 29 thru July 11 **3** July 27 thru August 8
 2 July 13 thru July 25 **4** August 10 thru August 15

Tuition per Session: 1, 2 or 3: \$2490, Mini Session 4: \$1195

Each additional Session discount \$200 (Mini Session 4: \$100)

For campers staying 2 or more sessions:

I will I will not be staying for the 'Between Session' stayover
'Between Session' stayover is \$195 additional.

REGISTRATION

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The applicant will provide proof of recent medical exam and has permission to participate in this program. In case of emergency, I grant permission for my child to be given medical treatment as prescribed by a physician or hospital. I agree to hold Joel Ross Tennis Enterprises, Inc, dba Joel Ross Tennis & Sports Camp and Joel Ross personally, harmless from any liability, loss, or personal expense arising out of this camp. I give permission for the use of any photos or video involving my child taken at camp for publicity purposes. I grant permission for my child to go on camp trips to i.e. bowling, movies, amusement parks, etc. I have read and agree to abide by the above.

(Parents)
Signature _____

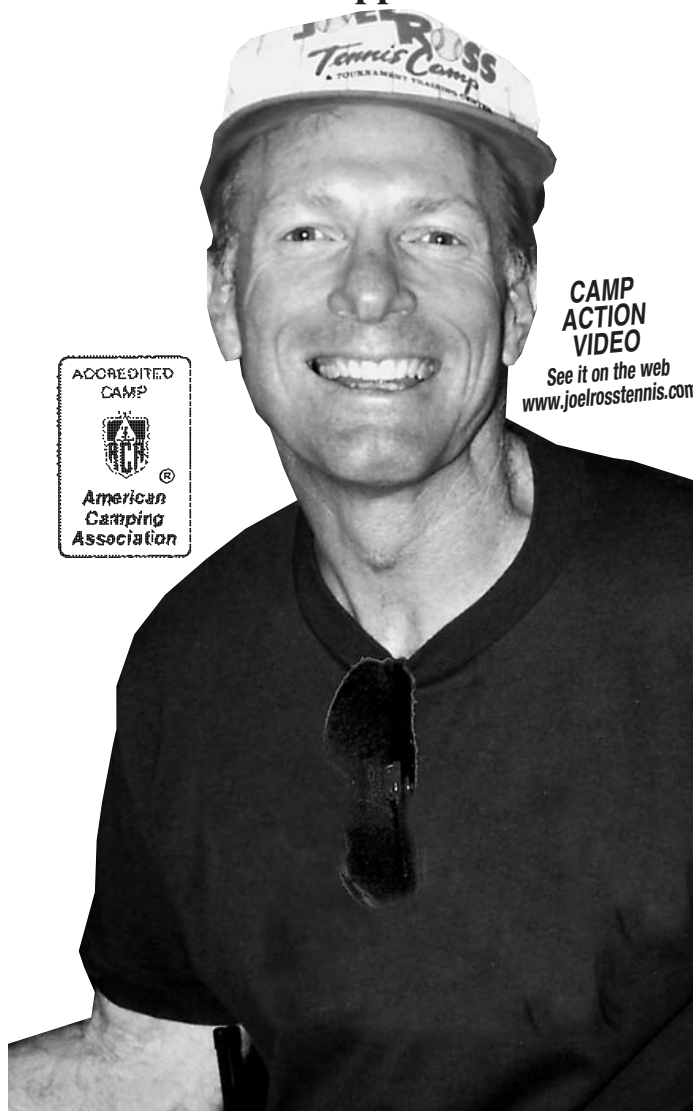
Make checks payable to:

Joel Ross Tennis Enterprises, Inc.
BOX 62H ■ SCARSDALE, N.Y. 10583

Tear here: Mail application and retain information side for your records.

JOEL ROSS *Tennis & Sports Camp*

2008 Camp Information
and Application



CAMP
ACTION
VIDEO
See it on the web
www.joelrosstennis.com

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