


50th Anniversary - 2020 WINTER RATES in effect until MARCH 20th

TUITION BELOW INCLUDES PT (Parent Trans.) or CPU (Central Pick Up)

2020 Camp Dates - June 29th - August 21st - - No Camp Friday, July 3rd					
Please Circle Desired Program	8 weeks	7 weeks	6 weeks	5 weeks	4 weeks
 Grade as of September 2020	June 29- Aug 21	1 2 3 4 5 6 7 8 circle weeks	1 2 3 4 5 6 7 8 circle weeks	1 2 3 4 5 6 7 8 circle weeks	1 2 3 4 5 6 7 8 circle weeks

MINI DAY

Preppys - T/TH 9:30AM-12:30PM. 2 & 3 Year Olds. Do not need to be toilet trained. NO TRANSPORTATION.	\$ 1,395	\$ 1,295	\$ 1,195	\$ 995	\$ 795
3 Mini Days - Pre-School - M/W/F - 9:00AM - 1:15PM. AM TRANSPORTATION ONLY.	\$ 2,795	\$ 2,595	\$ 2,395	\$ 2,095	\$ 1,695
5 Mini Days - Pre-School - 9:00AM - 1:15PM. AM TRANSPORTATION ONLY.	\$ 2,995	\$ 2,795	\$ 2,595	\$ 2,295	\$ 1,895

FULL DAY

NEW Flex Schedule - Choose any 19 days out of 39 days Pre-School - 2nd Grade	\$3,195				
3 Full Days - M/W/F Pre-School - 2nd Grade	\$ 3,595	\$ 3,395	\$ 3,195	\$ 2,695	\$ 2,195
4 Full Days - Choice Days; consistent for summer. Pre-School - 2nd Grade. Circle Days: M T W TH F	\$ 3,895	\$ 3,695	\$ 3,495	\$ 2,995	\$ 2,495
5 Full Days - Pre-School - 2nd Grade	\$ 4,295	\$ 4,095	\$ 3,895	\$ 3,395	\$ 2,895
5 Full Days - 3rd Grade - 6th Grade	\$ 4,695	\$ 4,495	\$ 4,295	\$ 3,795	\$ 3,295

TEEN

TRAVEL PROGRAM - 6th, 7th & 8th Grade. 3 days in camp. 2 days of trips. 6 - 8 weeks includes one 2 night overnight trip.	\$ 5,595	\$ 5,395	\$ 5,195	\$ 4,495	\$ 3,995
LIT PROGRAM (Leaders In Training) - 9th Grade & 10th Grade if not 15 yrs. old by June 1st. Counselor training and camp activities with LITs.	\$ 2,695	\$ 2,495	\$ 2,295	\$ 1,995	\$ 1,695

Please DEDUCT the following applicable Discounts - - please check the discounts that apply

- SIBLING DISCOUNT** - 8% OFF 2nd child; 12% OFF 3rd child or more. (discount will be deducted from lowest tuition)
- ENROLLED IN IL PRE-SCHOOL 2019-2020** - 20% OFF (full year 2 or more days;not to be combined w/ sibling discount)
- IVY LEAGUE PRE-SCHOOL 2018-19 GRADUATE** - 10% OFF

Please ADD the following options to the campers tuition - - please check the options that apply

- Door to Door Transportation**
FULL DAY & TEEN - \$500 8/7/6 weeks -\$300 5/4 weeks- 50% off Siblings
MINI DAY (AM only) - \$200 8/7/6 weeks -\$100 5/4 weeks- 50 % off Siblings
- Before and After Care**
AM & PM- \$280 8/7/6- \$180 5/4 weeks- 50% off Siblings

PLEASE CHECK PAYMENT OPTION BELOW

- PAY IN FULL- CHECK, CASH or CREDIT CARD** - check enclosed (payable to Ivy League Day Camp)
- Deposit of \$1000 by check or credit card. Balance due April 1st. *Credit card payments are subject to a 2.5% administrative fee***

Account # _____ Exp. Date: _____ Sec. Code: _____ Amount \$: _____



Camper Name _____ Male _____ Female _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Camper Birthdate _____ Sept 2020 Grade _____

Parent Name _____ Work # _____ Cell # _____

Parent Name _____ Work # _____ Cell # _____

E-Mail Address _____ @ _____

Please circle weeks attending
 (No Camp Friday, July 3rd)

1 June 29	2 July 6	3 July 13	4 July 20	5 July 27	6 August 3	7 August 10	8 August 17
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Program Selected: _____

Shirt Size Youth: XS (2-4) S (6-8) M (10-12) L (14-16)

Please Circle

*Travel & LIT Adult Sizes Only Adult: S M L XL 2X

Number of years at Ivy League including 2020 _____ 2019 Camp Group _____

I would like my child placed with: _____

(This must be with mutual consent by both parties, same school grade and enrolled in same program)

(Please no more than 2 camper requests. Please no negative requests.)

***CENTRAL PICK UP OPTION** - Locations based on enrollment (Jersey Strong Marlboro, RainTree Freehold, Old Bridge Shops, CVS Manalapan - Woodward Road, Meadow Creek, Battleground, ACME Rt 9 Freehold, Best Buy Manalapan, Food Emporium Marlboro Rt 79 & 520, Tinton Falls Outlets, Strathmore Matawan, Monroe location, Holmdel location). **Choose location:**

<p style="text-align: center;"><u>BEFORE and AFTER CARE</u></p> <p><input type="checkbox"/> I want my child in the before care from 7:15-8:30</p> <p>Circle Weeks 1 2 3 4 5 6 7 8</p> <p><input type="checkbox"/> I want my child in the after care from 4:15-6:00</p> <p>Circle Weeks 1 2 3 4 5 6 7 8</p>	<p>Bus pick up location if NOT same as home:</p> <p>Address: _____</p> <p>Town: _____</p> <p>Bus drop off location if NOT same as home:</p> <p>Address: _____</p> <p>Town: _____</p>
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Terms & Conditions - I understand all payments are refundable until April 1, 2020. After April 1, 2020 any reduction in weeks or program changes will result in a credit towards the following summer. Once camp begins if any reduction of weeks or program changes are made there will be no refunds or credits. No refunds or substitute days due to absence, late arrival, early departure or dismissal for cause or camp closing. If the camper is absent for medical reasons for more than 6 consecutive camp days, a refund will be made for days missed after the seven day deductible period. A physician's note must be provided. Camp is not responsible for clothing or personal belongings lost on premises or on trips. Parents hereby grant permission for the Ivy League Day Camp to photograph & video his/her child and use these pictures for website, brochure and display purposes. I also give permission for Ivy League to release my address and phone number to other children in the group for socializing. Tuition includes daily lunch, transportation, shirt and bag.

The Camp reserves the right to evaluate any child with physical, mental or emotional disabilities prior to Camp. For the general welfare of campers, the Camp reserves the right to dismiss any camper whose conduct or influence is inimical to the Camps best interest. I hereby give permission to Ivy League Day Camp to take my child, (2nd grade & older) on trips outside of Camp. The Directors will exercise every reasonable precaution consistent with safety, health and care. Furthermore, in the event that I, or my family physician, cannot be contacted in an emergency, I hereby grant permission to Centra-State Hospital in Freehold, or the nearest medical facility when on a trip, to provide a physician and to give emergency treatment to my child.

I agree that any dispute concerning, relating, or referring to this contract, any representation concerning my child's camping experience, or the camping experience itself shall be resolved exclusively by binding arbitration in NJ, according to the then existing commercial rules of the American Arbitration Association and the substantive laws of NJ.

If you choose less than 8 weeks, and add weeks after the camp starts, you will be billed at a weekly rate. (No discounts will apply). Any program changes made after registration will be prevailing rate.

Signature of parent or guardian: _____ DATE _____