



# 2009 Summer Sports Camps At the Leventhal-Sidman JCC

333 Nahanton Street, Newton Centre, MA 02459  
Sports Camp Office: (617) 558-6456

Register online  
at [www.lsjcc.org](http://www.lsjcc.org)

## 2009 REGISTRATION FORM (please print clearly)

**CHILD'S NAME** \_\_\_\_\_ Sex  M  F

Membership # \_\_\_\_\_ First \_\_\_\_\_ Last \_\_\_\_\_ Grade (as of 9/09) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age (as of 7/1/09) \_\_\_\_\_  
Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

Address \_\_\_\_\_

Home Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Home Email Address \_\_\_\_\_

Parent's Name \_\_\_\_\_ Work Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Pager Number ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Parent's Name \_\_\_\_\_ Work Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Pager Number ( \_\_\_\_\_ ) \_\_\_\_\_ Cell Phone ( \_\_\_\_\_ ) \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Work Telephone ( \_\_\_\_\_ ) \_\_\_\_\_ Home Telephone ( \_\_\_\_\_ ) \_\_\_\_\_

Pager Number ( \_\_\_\_\_ ) \_\_\_\_\_

What school does your child attend? \_\_\_\_\_

Does your child receive any special services at school? \_\_\_\_\_

Does your child have any medical needs? \_\_\_\_\_

Please list all medications (including psychotropic drugs) your child has taken in the last 12 months: \_\_\_\_\_

Does your child have any allergies? \_\_\_\_\_

Is there anything we should know about your child to make camp more enjoyable? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**AMERICAN RED CROSS SWIMMING SKILL LEVEL:** (please check)

- Level I     Level II     Level III     Level IV     Level V or above

**A MEDICAL FORM MUST BE SUBMITTED PRIOR TO ATTENDING CAMP.** It may be based on an examination performed within the last 12 months. I understand that my child will not be able to participate in camp activities until a completed application form and payment in full is received. I understand the camp's policies on registration and agree to be responsible for the payment of all fees due. In the case of emergency I hereby give permission to the Leventhal-Sidman JCC to secure proper treatment. I understand that the camp expects each child to be covered by medical insurance. **I authorize the Leventhal-Sidman JCC to use still or video photographs of my child for publicity purposes. The children will not be identified.**

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

Total Number of Weeks x \$100 = Total Deposit \$ \_\_\_\_\_

MC/Visa Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

**Please mail this form along with a nonrefundable deposit of \$100 (per week) to: SummerSports, LSJCC, 333 Nahanton Street, Newton Centre, MA 02459-3213. Please make and keep a copy for your records. Early registration deposit is due by May 1, 2009. Final payments are due by May 15, 2009.**

**PLEASE DIRECT ALL INQUIRES TO:** Ellen Greenblatt at (617) 558-6456 or at egreenblatt@jccgb.org

**SPORTS CLINICS:** Check clinics you will attend and appropriate dates:

**Basketball Camp at the JCC** LFCB\_\_ M9

- Full Day (9a-4p) Half Day (9a-1p)  
 June 22-26    Full \_\_\_\_\_    Half \_\_\_\_\_  
 June 29-July 3    Full \_\_\_\_\_    Half \_\_\_\_\_  
 August 24-28    Full \_\_\_\_\_    Half \_\_\_\_\_

**Rich Gedman Baseball Camp** LFCRG\_\_ M9

- Full Day (9a-4p) Half Day (9a-1p)  
 July 6-10    Full \_\_\_\_\_    Half \_\_\_\_\_  
 August 10-14    Full \_\_\_\_\_    Half \_\_\_\_\_

**Tri-Star Soccer Camp** LFICTS\_\_ M9

- Full Day (9a-4p) Half Day (9a-1p)  
 July 20-24    Full \_\_\_\_\_    Half \_\_\_\_\_  
 August 17-21    Full \_\_\_\_\_    Half \_\_\_\_\_

**Mini-Sports Camp** LFCMN\_\_ M9 (9a-4p)

- June 15-19  
 June 22-26

**Wide World of Sports** LFCWW\_\_ M9 (9a-4p)

- July 13-17     August 17-21  
 July 27-31     August 31-Sept 4  
 August 3-7

**Climb & Camp** LFCCL01M9 (9a-4p)

- July 13-17

**G.O.A.L.S. Camp** LFCGO01M9 (9a-4p)

- August 3-7

**Expedition G.O.A.L.S. Camp** LFCXG01M9 (9a-4p)

- August 10-14

**Tennis Camp** LFCYT\_\_ M9 (10a-4p)

- Weekly June 22-Sept 4

Indicate Week(s): \_\_\_\_\_

- Tennis Early Drop-off     Tennis Extended Day  
LFCBT\_\_ M9    LFCAT\_\_ M9

**All★Star Swim Camp** LFCSC\_\_ M9

- Full Day (9a-4p) Half (9a-1p)  
 August 17-21    Full \_\_\_\_\_    Half \_\_\_\_\_

**Swim/Tennis Half Day Camp** LFCHT\_\_ M9 (9a-1p)

- June 29-July 3     July 27-31  
 July 6-10     August 3-7  
 July 13-17     August 10-14  
 July 20-24

**Great Moves! Healthy Lifestyle Camp** LFCGM\_\_ M9 (9a-12p)

- June 29-July3     July 27-31  
 July 6-10     August 3-7  
 July 13-17     August 10-14  
 July 20-24     August 17-21

**Flying Fantasy Circus Camp** (2 weeks) LFCFF01M9 (9a-4p)

- August 24-Sept 4

**Golf Camp at Ponkapoag Golf Course**

- 3-Day Junior Golf Camp** LFCG3\_\_ M9 (T,W,Th 9a-1p)  
Weekly June 15-Sept 4

Indicate Week(s): \_\_\_\_\_

- 5-Day Junior Golf Camp** LFCG5\_\_ M9 (9a-1p)

Weekly June 15-Sept 4

Indicate Week(s): \_\_\_\_\_

- 5-Day Day Players Camp** LFCGP\_\_ M9 (9a-3p)

Weekly June 15-Sept 4

Indicate Week(s): \_\_\_\_\_

- 5-Day Play and Practice Golf Camp** LFITPP\_\_ M9 (9:30a-5p)

Weekly June 22-August 28

Indicate Week(s): \_\_\_\_\_

**Tournament Players Camp** LFITGC\_\_ M9 (9a-5p)

- July 27-31     August 10-14  
 August 3-7     August 17-21

**EARLY DROP-OFF** (LFCBR\_\_ M9): Please list camp(s) and dates:  
\_\_\_\_\_

**EXTENDED DAY** (LFCAR\_\_ M9): Please list camp(s) and dates:  
\_\_\_\_\_