



Magen Israel Summer Program

122 Cuttermill Road • Great Neck, NY 11021

(516) 482-2305 | (516) 466-6862 • magenisraelcenter@gmail.com • www.magenisraelcenter.com

February 2018

Shvat 5778

Dear Parents,

Welcome to Magen Israel of Great Neck, as we celebrate our 27th year of educating children in a fun and creative Torah environment. With over two decades of service to the community, our summer program has given hundreds of children a meaningful and thrilling summer experience over the years.

Magen Israel enjoys a well-earned reputation as a trendsetter, with innovative ideas, creative programs, and new activities being introduced continuously. Many a child has been known to wait all year to come back, from preschoolers to our senior division, children delight in the warm and spirited, Jewish atmosphere of Magen Israel.

Our children enjoy a wide range of activities including swimming, sports, creative movement, arts & crafts, baking, and so much more. From offsite trips to onsite entertainers, there's never a dull moment. Torah learning is a predominant part of our week and our Yeshivacation program incorporates daily classes in in-depth Mishnayot, Chumash, and Gemara.

This year we are pleased to offer early bird rates for those registered by Tuesday, May 30, 2017.

We are pleased to offer pick-up and drop-off bus services at discounted rates for the Izzy Girls and Yeshivacation divisions.

For further inquiries, please feel free to call (516) 482-2305 between the hours of 10:00 am and 3:00 pm.

For your convenience, you are welcome to register:

- By email: magenisraelcenter@gmail.com
- Online at www.magenisraelcenter.com
- In person, at our Primary School Office:
54 Steamboat Road, Mon-Thurs until Thursday, June 21, 2018 - (516) 482 - 2305.
- As of Sunday, June 24, 2016 the office will be open at the summer program site:
Long Island Hebrew Academy - 122 Cutter Mill Road - (516) 466-6862 / 516-482-2305

With best wishes and looking forward to welcoming your child in the summer
Rabbi & Tammy Chayempour



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REGISTRATION FORM

LAST NAME: _____ FIRST NAME: _____ HEBREW NAME: _____

ADDRESS: _____ CITY: _____ ZIP: _____ GENDER: _____

DATE OF BIRTH: _____ AGE: _____ GRADE BY SEPTEMBER '18: _____ SCHOOL: _____

MOM'S CELL: _____ DAD'S CELL: _____ HOME #: _____

MOM'S NAME: _____ OCCUPATION: _____ EMAIL: _____

DAD'S NAME: _____ OCCUPATION: _____ EMAIL: _____

SYNAGOGUE: _____ MARITAL STATUS: _____ MOM'S MAIDEN NAME: _____

EMERGENCY CONTACTS: NAME: _____ (_____) RELATIONSHIP: _____

NAME: _____ (_____) RELATIONSHIP: _____

PHYSICIAN'S NAME AND PHONE NUMBER: _____

ALLERGIES (ALLERY, REACTION, TREATMENT): _____

CAN YOUR CHILD PARTICIPATE IN ALL PHYSICAL ACTIVITIES? _____

DOES YOUR CHILD CURRENTLY RECEIVE ANY OF THE FOLLOWING SERVICES? SPEECH PT OT SEIT

LIST THE SCHOOLS YOUR CHILD PREVIOUSLY ATTENDED: _____

ANY PERTINENT INFORMATION REGARDING YOUR CHILD THAT WE SHOULD KNOW? _____

TERMS AND CONDITIONS

- Parental Consent: I hereby permit my child to participate in all activities of the Gan Israel Center-on and off site activities including trips, outings, swimming, off campus swimming pools, parks, etc.
- Medical forms: A completed Medical record of your child must be submitted to the office before the program begins. For any reason, Gan Israel C. reserves the right to cancel the enrollment and refund a pro rata amount of the tuitions (based on number of the weeks attended).
- The enrollment is weekly only. The week starts on Monday and ends by Friday.
- Payment And Cancellation:
The \$ 50 Registration fee is separate from the Enrollment fee and is non-refundable.
The full enrollment fee is due before the program begins.
I agree to pay the registration and enrollment fee.
No child is admitted to the program until the Medical Form and the full payment have been received.
There are no refunds for Absences, Vacations, Withdrawals, illnesses once the session has begun.
- Medical Care: In the event of an emergency, while my child is under camp supervision, I hereby give permission for the person in charge to have my child taken to an emergency room/doctor's office for medical treatment, with the understanding that the parents will be notified as soon as possible. I release the program from all Liabilities during supervised activities.
- Dismissal: Parents fully understands and agree that the program reserves the right to dismiss, in its sole discretion, any child whose condition, conduct, influence or behavior is deemed unsatisfactory or violates the program rules and regulations.
- IMAGES, ETC.: Permission is hereby given for the program to use in promoting the program and in other venture directly relating to the program digital, photographic, video, and audio images or likenesses of the children; and statements, articles, names, music, art, photographs, films and videos created by children or originating from program or from summer program related activity. I permit the use of my child's photo for promotional purposes.

Weeks Attending (please tick)

- Week 1** (6/25 – 6/29) **Week 2** (7/2 – 7/6) **Week 3** (7/9 -7/13) **Week 4** (7/16 - 7/20)
 Week 5 (7/23 - 7/27) **Week 6** (7/30 – 8/3) **Week 7** (8/6 -8/10) **Week 8** (8/13 – 8/17)

Bus Service (\$50 per child per week)

Late Stay (\$20 per week)

I have read and agree to all of the terms and conditions of this Enrollment Application.

Parent / Guardian Signature: _____ Date: _____

Please complete the entire form. If registering multiple children, family info need not be repeated but each child needs a signed registration, New families must attend an interview before completing registration. Please call (516)482-2305 to schedule an interview

Magen Israel Summer Program is under the auspices of the Nassau County Department of Health

For office use: Registration fee received Payment Received
Receipt No. _____ By: _____ Date: _____



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Dates

- Week 1 (6/25 – 6/29)
- Week 2 (7/2 – 7/6)
- Week 3 (7/9 -7/13)
- Week 4 (7/16 - 7/20)
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- Week 6 (7/30 – 8/3)
- Week 7 (8/6 -8/10)
- Week 8 (8/13 – 8/17)

Hours

IZZY KIDDIES: Boys and Girls ages 3-5

**Must be Toilet Trained*

Monday - Thursday: 9:00 a.m. - 3:00 p.m.

Friday: 9:00 a.m. - 1:45 p.m.

IZZY GIRLS: Girls ages 6-12

YESHIVACATION: Boys ages 6-12

Monday - Thursday: 9:00 a.m.-4:00 p.m.

Friday 9:00 a.m. - 2:00 p.m.

Rates

Enrollment fees Include: Tuition, all trip expenses, insurance, breakfast, lunch, and two snacks every day.

Enrollment fees may be submitted in the form of cash, check, or credit card.

Please note that for payments made by credit card, a 4% service charge will apply.

MAKE ALL CHECKS PAYABLE TO **GAN ISRAEL**

REGISTRATION FEE: \$50 PER FAMILY (NON REFUNDABLE)

IZZY KIDDY RATES | AGES 3-5:

1-3 weeks: \$280 per week

4-8 weeks: \$265 per week

IZZY GIRLS AND YESHIVACATION RATES | AGES 6-12:

1-3 weeks: \$310 per week

4-8 weeks: \$295 per week

Sibling Discount: Receive \$15 off per week for each additional sibling when both attend for four weeks or more.

Referral Discount: Refer a new family and receive a \$50 discount when he/she attends at least four weeks.

Late Stay Program: Available only for Izzy Kiddies who have an older sibling attending the program:

\$20 per child per week

Bus Service: Pickup and drop off is available for children in the Izzy Girls and Yeshivacation division (ages 6-12):

\$50 per child per week

\$100 per family per week