CAMP MEROMIM
Like No Other Camp!

5785 Camper Application

❒**Additional Week** (July 23 - July 29 – 27 Tamuz - 4 Av)

Camper's Name_____
Last Name First Name Middle

Name Child Prefers To Be Called By_____

Address_____**City**_____**State**_____**Zip**_____

Home Tel. _____ **Summer Tel.** _____ **Preferred Tel.**_____

Date of Birth_____ **Current Grade**_____ **Yeshiva Attending**_____

Current Rebbi_____ **Yeshiva Attending Next Year**_____

Camp(s) Previously Attended '22 _____ **'23**_____

'24_____ **Recommended By**_____

Parent's Marital Status ❒**Married** ❒**Divorced** ❒**Separated** ❒**Widowed**

Father's Name_____ **Occupation**_____ **Business Tel.**_____

Mother's Name_____ **Occupation**_____ **Business Tel.**_____

Father's Cell_____ **Mother's Cell**_____ **E-Mail**_____

EMERGENCY CONTACT INFO: In the event parents cannot be reached, please contact in the following order:

Name_____ **Relationship to camper**_____

Tel._____ **Cell**_____

Name_____ **Relationship to camper**_____

Tel._____ **Cell**_____

Family Physician_____ **Tel.**_____

Camper References: Please list 2 references, one of them should be your son's Rebbi, Menahel or Mashgiach.

Name_____ **Position**_____ **Tel.**_____

Name_____ **Position**_____ **Tel.**_____

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