

Machaneh Miriam Madatz Application 2010

By completing and submitting this form, you are applying for Madatz at Machaneh Miriam 2010. As part of the acceptance process, you will be called for an interview. You will be informed of your acceptance a month after this form is received. Complete the form fully and legibly, using a pen or computer. Applicant and parent must sign.

BASIC INFORMATION

Name	Grade Completed by Summer:
Date of Birth ____/____/____ mm dd yyyy	Present School
Camper Primarily Resides With <input type="checkbox"/> Both Parents <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Other _____	
Camper E-mail	Attended Miriam before? Yes No
Camper Home Address (include city & postal Code)	
Mother's Name:	Father's Name:
Home Address of Parent not at above address (if applicable) (include city and postal code)	
Camper Home Phone # Other Parent Home Phone # (if applicable)	
Camper Cell Phone #	Mother Cell Phone # Father Cell Phone #
Mother Work Phone #	Father Work Phone #
Mother Email	Father Email
Camp fees receipt to:	

Habonim Dror Machaneh Participation

List Habonim Dror Machanot you have attended and when: _____

Other non-Habonim Dror summer camps you have attended: _____

Describe your involvement in your local ken as a chanich/a and madrich/a.

National Habonim Dror Participation

	MBI	Fall Mercaz	Winter Seminar/Veida
2009			

JEWISH BACKGROUND

1. Hebrew School: _____ Years attended: _____

2. Jewish Organizations to which you belong now or in the past:

1. _____ Position(s) held _____ Year(s) _____

2. _____ Position(s) held _____ Year(s) _____

3. Have you visited Israel with family or participated in any Israel programs other than through Habonim Dror? Please describe:

IMPORTANT INFORMATION

Please circle any of the following activities with which you have a special interest or skill in:

- | | | |
|---------------------|--------------------------|--------------------|
| Group Games | Swimming | Creative Writing |
| Sports | Teva/Nature Study | Teaching Hebrew |
| Tzofit (scouting) | Israeli/Jewish History | Martial Arts |
| Israeli Dancing | Musical instrument _____ | Ropes Course |
| Other Dancing _____ | Drama | First Aid |
| Photography | Jewish Customs/Ritual | Avodah |
| Arts and Crafts | Mediation | Shira/Folk Singing |
| Others: _____ | | |

List any courses you have taken that are relevant to youth instruction or education:

Have you had any leadership experience outside of Habonim Dror? ____ If so, give details _____

List prior work experience.

Employer	Position/Duties	Contact Number	Dates of Employment

List prior community/volunteer experience.

Name of Organization	Position/Duties	Dates of Service

Please provide the names of two non-related references. One should be a staff person from MBI, if you attended, and one should be a staff person who knows you as a chanich at a Habonim Dror Machaneh.

Name	Address	Phone #	E-mail	Position/Relation

The Madatz program at Machaneh Miriam strives to prepare future Habonim Dror madrichim (counselors). The Madatz are in the process of making the transition from being chanichim to being madrichim. As part of a close knit team, living among their peers, the Madatz will acquire skills and develop techniques to help them better interact with both younger campers and staff members. Each Madatz is expected to fully participate in the program; this means being part of all activities planned for them, creating activities and caring for chanichim, and setting an example of appropriate behaviour at all times.

With these goals in mind, please complete the following questions on a separate piece of paper and attach to this application form.

1. Rank these goals in order of importance for your madatz program and state why: working with kids, kvutseh, learning about the movement.
2. What strengths would you bring to your Madatz kvutza?
3. Describe any interests/skills that you could share with chanichim this summer.
4. Describe briefly the most memorable peula you have participated in and how you could share that in Madatz.
5. Share any other information which is not covered by this form and which you would want known about you.

I understand both the goals and responsibilities of the Madatz program. I recognize that Madatz is a serious commitment that requires a high level of participation. I understand that being in the program is different from being a chanich and I am prepared to take that responsibility. I will abide by all Machaneh Miriam rules, which include respecting all people in the machaneh, not using or possessing illegal drugs, alcohol, or tobacco products.

Signature of applicant : _____ Date: _____

I am aware and supportive of my child's participation in Madatz 2010 at Camp Miriam. I have read and completed the payment information which accompanies this form.

Signature of parent/guardian: _____ Date: _____

PAYMENT OPTIONS FOR CAMP MIRIAM 2010

I am enclosing a cheque for \$ _____ as a deposit for _____'s registration.

CHILD/REN'S NAMES

Charge my **Visa** # _____ Expiry date (MM/YY) _____ for the amount of \$ _____ + the service charge (3%) _____ to cover the deposit for _____.

CHILD/REN'S NAME

Name on Credit Card: _____

Signature of Card Holder _____

I understand that the remaining fee balance is due April 26, 2010. Further payment will be made by:

- _____ Cheque for outstanding balance on April 26, 2010.
- _____ Visa – use above number for outstanding balance on April 26, 2010.
- _____ Post dated cheques dated from _____ until _____* (June 15, 2010 recommended).
- _____ Post dated Visa – use above number for _____ payments of \$ _____, charged monthly, dated from _____ to _____* (June 15, 2010 is recommended).
- _____ I will make financial arrangements with the registrar by March 1, 2010.

_____ Please send an application form for financial assistance.

***Please note: Post dated payments received after June 15th will be charged 7% due to HST Tax.**

I agree to the above payment schedule. Parent Signature: _____ Date: _____

_____ Our family is happy to donate \$ _____ to Camp Miriam to be used for general operation, camper scholarships, or the Alisa Bowman Leadership Fund. (please circle one or add your own designation)
A tax receipt will be issued. Thank you very much for your generosity.

CAMP MIRIAM PRIVACY POLICY / TERMS AND CONDITIONS FORM

Habonim Dror Camp Miriam respects and upholds an individuals' right to privacy. Your information/registration will be maintained as a confidential, secure record. Please note that in order to take proper care of your child(ren) while at camp, it may be necessary to contact the institutions or professionals listed on this form or subsequent medical forms to discuss certain basic personal information about your child (e.g. name, age, school behaviour, medical condition). Camp Miriam will only use the information as necessary for the administration and provision of camp services.

For further information about use of your personal information please call the Camp Miriam office at 604 – 266-2825.

“We consent to the use of our (my) contact information for the delivery of Habonim Dror youth program information.”

Please indicate your choice and initial: Yes _____ No _____ Your initials _____

“We consent to the use of any photo, slide or likeness of our (my) child for promotion and publicity of Camp Miriam (both in print and online).” Please indicate your choice and initial: Yes _____ No _____ Your initials _____

“We consent to our (my) child’s contact information being distributed to all camp families as part of Camp Miriam’s roster.” Please indicate your choice and initial: Yes _____ No _____ Your initials _____

“We understand that Camp Miriam accepts no responsibility for loss or damage to my child’s property at camp.”
Please sign your initials _____

I, parent/guardian of _____ have read and agree to the registration and payment policies of Camp Miriam, as stated in the attached registration letter.

_____ **Print Name**

_____ **Signature**

_____ **Date**

**Mail application form to: Camp Miriam, #303 – 950 W. 41st Ave. Vancouver BC V5Z 2N7
Fax: 1.866.623.7721 or EMAIL: registrar@campmiriam.org**