



Isabella Freedman

JEWISH RETREAT CENTER

CAMP ISABELLA FREEDMAN

All-Inclusive Berkshire Vacation for Senior Adults

Monday, July 7 – Sunday, July 20, 2014

REGISTRATION FORM

Space is limited, so please fill out and mail this completed form,
with your \$100 deposit **by April 1, 2014** to:

Camp Isabella Freedman
116 Johnson Rd, Falls Village, CT 06031

Important Information

- Guests must be able to walk the equivalent of three city blocks.
- Guests who need assistance with mobility must bring an aide to accompany them. (10% discount for aides)
- Guests must complete a health assessment form prior to acceptance.
- Isabella Freedman will provide free transportation from and to Brooklyn, the Bronx, Queens, and Manhattan and free shuttle service from and to Bradley Airport, Wassaic Train Station, and Canaan Bus Stop on Monday, July 7th and Sunday, July 20th only. Other transportation needs will be at guests' own expense.

Rates

- Rates range from \$1155 to \$2573. Prices include all lodging, meals, in-camp activities, and transportation to and from Isabella Freedman as described above.
- Prices do not include costs for trips to local destinations.

DOUBLE OCCUPANCY ROOMS	SINGLE OCCUPANCY ROOMS
Premium Double Occupancy: \$1785 Weinberg	Premium Single Occupancy: \$2573 Weinberg
Deluxe Double Occupancy: \$1628 May, Scheuer	Deluxe Single Occupancy: \$2415 May, Scheuer
Private Bath Double Occupancy: \$1470 Pine	Private Bath Single Occupancy: \$2048 Pine
Semi-Private Bath Double Occupancy: \$1260 Maple, Blue Heron, Cedar	Semi-Private Bath Single Occupancy: \$1575 Maple, Blue Heron, Cedar
Shared Bath Double Occupancy: \$1155 Elm, Kaufman, Daisy	Shared Bath Single Occupancy: \$1365 Elm, Kaufman, Daisy

Cancellation Policy

- All registration forms are subject to approval and a deposit of **\$100 per person** is required and is **nonrefundable** under all circumstances.
- There is an *additional* \$275 fee per person if you cancel after **May 30, 2014**.
- There will be no refunds for cancellations after **July 1, 2014** for late arrivals, or for early departures.
- This cancellation policy applies even if the cancellation is for medical reasons.

The registration form continues on the back of this page.
Please complete all information on both sides.

800.398.2630 | hazon.org/camp-isabella-freedman

Participant Information: Please print neatly and clearly.

LAST NAME (PLEASE PRINT) FIRST NAME GENDER (M/F) NEW/RETURNING

LAST NAME (PLEASE PRINT) FIRST NAME GENDER (M/F) NEW/RETURNING
(Please indicate if your husband or wife is attending, if applicable.)

ADDRESS APT # CITY STATE ZIP

TELEPHONE EMAIL

Please list dietary or other special needs:

If this is your **first time** at Isabella Freedman, please let us know who referred you or how you found out about us:

Accommodations Selection

Name of preferred cottage: _____ Single or double occupancy: _____

Name of suggested roommate (if applicable): _____

How Are You Getting to Isabella Freedman? Please select one choice.

- Plan to Drive NYC Bus Provided by Isabella Freedman (check one)
 Bronx Queens Brooklyn Manhattan Bradley Airport Hartford, CT Wassaic Train from Grand Central Canaan, CT Bus Stop

Payment Information

All registration forms are subject to approval and a deposit of \$100 per person is required and is **nonrefundable** under all circumstances. Registration forms and balance must be received **by May 30, 2014** in order to insure a space in the program. Receipt of application does not ensure acceptance to the program.

Please select a payment option:

- Pay by credit card.** Please charge my credit card in the amount of \$_____.
 Check here if you would like the balance to be automatically billed to your credit card on **May 30, 2014**.

Circle One: VISA Mastercard American Express
Card Number: _____ Security Code: _____ Expiration Date: _____

- Pay by check.** I have enclosed a check payable to **Isabella Freedman** in the amount of \$_____.
I will send the remaining balance by May 30, 2014.

Your Signature: _____ Date: _____

All registration forms are subject to approval. Please send completed form with deposit to:
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