



2024 Season

Allergies: YES NO

Camper's Name _____ M / F

Address _____ Town/Zip _____

**Mother's
Information**

Name _____

Cell: _____

Email: _____

**Father's
Information**

Name _____

Cell _____

Email _____

Birthdate

Month _____ Date _____ Year _____

Siblings/Age _____

**School
Experience**

Current School _____

Class Age _____ Teacher's Name _____

School Entering Fall 2024 _____ 2024 Class Age _____

CHILD'S NAME _____ 2024 Season

Approved Pick-Up Guardian	Name _____
Other Than Parents	Relationship to Camper _____
	Cell _____

LOCAL Emergency Contact	Name _____
Other Than Parents	Relationship to Camper _____
	Cell _____

CHECK which session(s) you'd like to attend
Full payment must be included with registration forms
ONE form per child, please
No single week registrations
NEW Hours: 9:00 am to 1 pm

2-1/2+ and Young 3's
Yellow Group – 2-1/2 + must enroll for all 4 weeks

<p>_____ SESSION ONE \$855</p> <p>June 24th, 25th, 26th, 27th, 28th</p> <p>July 1st, 2nd, 3rd (closed July 4th and 5th)</p> <p>_____ SESSION TWO \$1,070</p> <p>July 8th, 9th, 10th, 11th, 12th</p> <p>July 15th, 16th, 17th, 18th, 19th</p>

Preschoolers: Older 3's to 5 years old

<p>_____ SESSION ONE \$735</p> <p>June 24th, 25th, 26th, 27th, 28th</p> <p>July 1st, 2nd, 3rd (closed July 4th and 5th)</p> <p>_____ SESSION TWO \$920</p> <p>July 8th, 9th, 10th, 11th, 12th</p> <p>July 15th, 16th, 17th, 18th, 19th</p>

CHILD'S NAME _____

ALLERGY CHILD NO _____ YES _____ will require Dr. report

VACCINATION REPORT FROM PEDIATRICIAN REQUIRED BEFORE CAMP BEGINS

MEDICAL INFORMATION

Allergies/physiological /psychological/other issues _____

Child's Doctor _____

Doctor's Town & Phone _____

EMERGENCY CONTACT Other Than Parents *(this is not authorization for pick up)*

Name _____ Relationship _____

Address /Town _____

Phone Number _____

In signing this application, I authorize Summer Fun Day Camp, LLC, to seek emergency medical care for my child if a medical emergency occurs as deemed necessary by the Owner and/or her designees.

Print Parents Name _____

Parent Signature _____ Date _____



SIGNATURE PAGE

REFUND/CREDIT POLICY

NO Refunds or Credits after March 31, 2024

NO Refunds or Credits given for days that your child does not/cannot attend Camp

NO Exceptions

RE: Covid-19 Policy – If state requires Camp to close only due specifically to Covid-19 regulations, refunds or credits will be made only to those who had previously paid for the exact time required to close. No other weeks will be refunded or credited.

Please initial that you have read the above statement

PHOTO WAIVER

I give permission for my child's picture to be shared in context of group photos directly with other Campers/Families:
Photos will NOT be used for any social media or website postings.

Yes No

BEHAVIOR POLICY

No Refund if Camper is asked to leave the program for issues deemed necessary by Owner.

Please initial

CHILDREN WITH INJURIES SUSTAINED OUTSIDE OF CAMP

Contact Director to discuss what is deemed appropriate and safe for campers/staff/program.

Please initial

SICK CAMPERS

Please do not bring Campers who have a fever, productive cough or consistently running nose to Camp. If any of these symptoms exist as consistent during the Camp day, we will call to ask that the Camper be taken home as to not contaminate other students and teachers. Thank you for your cooperation.

Please initial

IN SIGNING BELOW, I ATTEST TO HAVE READ AND AGREE TO THE STATEMENTS AND POLICIES ABOVE.

Print Name _____

Signature _____

Camper's Name _____

Date _____



2024
NOTES TO CHERYL

CAMPER'S NAME _____

Our #1 priority is to ensure that Campers and their families feel safe and comfortable at our program.

If you'd like, please fill out the form below.

The staff and I are always available to speak with you at any time of day/night, don't hesitate to contact us!

Cheryl Mercer 973-714-5588

NOTES

Please list below any notes you'd like the staff to know about your child. All info collected is confidential and will only be shared with Camp staff.

**REQUESTS /
FRIENDS**

Please list below if you have a special request for your Camper or would like them to be in a group with their friends and we will do our best to accommodate. Friend requests must be in the same age group as your child.