

CAMP REGISTRATION FORM

(June 11-Aug 24)

LAST NAME: _____ FIRST NAME(S): _____

STATUS: CURRENT / NEW (**if new, you must also complete Family registration form*)

\$35/Day ~ OR ~ \$160/5 day week

WEEK	THEME	MON	TUES	WED	THURS	FRI	TOTAL
Week 1	Pooh meets Paddington	6/11	6/12	6/13	6/14	6/15	\$
Week 2	Best Little Chefs	6/18	6/19	6/20	6/21	6/22	\$
Week 3	Treasure in NJ	6/25	6/26	6/27	6/28	6/29	\$
Week 4	American Heroes	7/2	7/3		7/5	7/6	\$
Week 5	All Ball	7/9	7/10	7/11	7/12	7/13	\$
Week 6	Under the Big Top	7/16	7/17	7/18	7/19	7/20	\$
Week 7	Ninja vs Spartan	7/23	7/24	7/25	7/26	7/27	\$
Week 8	CS Fun Cruise	7/30	7/31	8/1	8/2	8/3	\$
Week 9	World of Legos	8/6	8/7	8/8	8/9	8/10	\$
Week 10	Gold Rush	8/13	8/14	8/15	8/16	8/17	\$
Week 11	Beyond Board Games	8/20	8/21	8/22	8/23	8/24	\$
GRAND TOTAL (carry over to pg 2):							\$

X _____ _____	_____ _____
(PARENT'S SIGNATURE)	(DATE)

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GRAND TOTAL (from pg 1)	\$
Multiple Children Discount (10%)	-
TOTAL:	\$
Multiple Week Discount	-
3-4 wks:10% / 5-6 wks: 15% / 7+ wks: 40%	
Membership Fee (if applicable, must be PIF at registration)	\$
TOTAL CAMP:	\$

X _____

_____ (PARENT'S SIGNATURE) _____ (DATE)

~~~~~ PAYMENT OPTIONS ~~~~~

(All accounts **MUST** be current PRIOR to continuing next session)

Payment made in full (for Summer session charges of \$150 or less)
AUTOPAY (for Summer session charges of more than \$150): Equal payments are billed directly to any debit/credit card left on file

First of which is **due at time of registration**

2nd & 3rd Payments will be billed on the **23rd of June & July**

See Front Desk to set up Autopay.

-----for office use only-----

PIF \$ _____ Method: _____

Auto-Pay on file

1st pmt chg \$ _____ 2nd pmt chg \$ _____ 3rd pmt chg \$ _____

Date _____ Staff Initials _____