BROOKSIDE SCHOOL SUMMER DAY CAMP APPLICATION

Child's Name: _____, _____
Last First
Child's Social Security # _____

Date of Birth _____Age ____ Male ___ Female ___

Allergies _____ Child will enter Grade ___(9/09)

Address _____Phone _____
Town _____ Zip _____

Mother's Name _____ Phone (Work) _____
Address (if different) _____Phone (Home) _____
Social Security # _____ Phone (Cell) _____
Driver's License # _____ email _____

Father's Name _____ Phone (Work) _____
Address (if different) _____Phone (Home) _____
Social Security # _____ Phone (Cell) _____
Driver's License # _____ email _____

Emergency Contacts (other than parent)
1. Name _____ Phone _____
2. Name _____ Phone _____

Restrictions on pick up (if any) _____

Temporary Medical Release

I, the parent of _____ promise to provide the required medical form to the Brookside Summer Day Camp. I also do hereby relieve all parties concerned of any responsibility that may occur as a result of my failure to produce said medical form.

Date _____ **Signature** _____

1 June29 to July 2*	2 July 6 to July10	3 July13 to July17	4 July 20 to July 24	5 July 27 to July 31	6 Aug 3 to Aug.7	7 Aug. 10 to Aug.14	8 Aug 17 to Aug 21	9 Aug. 24 to Aug.28	Total

Circle weeks – TWO CONSECUTIVE WEEKS MINIMUM
*No camp on July 3rd

$200.00 per child (Registration Fee & Deposit) **MUST** accompany this form. **NO REFUNDS!**

Transportation: Yes ___ No ___Pickup address _____
Drop off address _____
Nearest Intersection _____
Days: MT _____ WRF _____ 5day _____
Session: AM _____ PM _____ Full _____
Extended Care: Drop off time _____ Pick up time _____

Registration Fee	$ 50.00
Camp Fee _____ Weeks @ _____	$_____
Trans. _____Weeks @ _____	$_____
Sleepovers _____ @ _____	$_____
Extended Care _____ hrs.@ _____	$_____
Total	$_____
Less Registration & Deposit	-$_____
Balance Due By June 1st	$_____

Date	Debits	Credits	Balance

Please enroll my child for the period specified on this application. I understand there will be NO REFUNDS. The balance is to be paid in full by June 1, 2009. Unless you object, photos of your child may be posted on the school website.

Date _____ **Signature** _____