

# Vacation Camp Registration Form

Grades K-5

1. NO REFUNDS (except documented medical reasons) or CREDITS will be issued once camp has begun. A fee of \$5.00 will be charged per registration for any of the following reasons: medical refunds or cancellation prior to the start of camp.
2. **Forms of payment: check (payable to Treasurer, Town of Orange) Visa, MC or exact cash.**

## April Vacation Camp

ACTIVITY # 614000-Section A

\$175.00/\$185.00

Monday, April 18-Friday, April 22

9:00am-4:00pm

REGISTRATION BEGINS ON FEBRUARY 22

Name \_\_\_\_\_ Male / Female

Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_

Address \_\_\_\_\_

Town/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Phone \_\_\_\_\_ Relationship \_\_\_\_\_

If the participant has any special needs, requires special assistance and/has allergies or needs medications, please list here and speak to Scott.

\_\_\_\_\_.

**The camp newsletter will be emailed to all households who have provided us with one.**

### BEFORE AND AFTER CARE (\$6.00 per time slot)

|                              | Mon.  | Tues. | Wed.  | Thurs. | Fri.  |
|------------------------------|-------|-------|-------|--------|-------|
| Early Stay (7:30 - 9:00a.m.) | _____ | _____ | _____ | _____  | _____ |
| Late Stay (4:00 - 5:30p.m.)  | _____ | _____ | _____ | _____  | _____ |

Number of sessions \_\_\_\_\_ X \$6.00 = \_\_\_\_\_  
\_\_\_\_\_ Camp Fee  
\_\_\_\_\_ Total

Please sign after reading all registration procedures and refund policies.

Parent/Guardian signature \_\_\_\_\_