



Christopher Academy

1390 Terrill Road
Scotch Plains, New Jersey 07076
Fax (908)322-4616
(908)322-4652

SUMMER CAMP REGISTRATION FORM 2018

SCOTCH PLAINS CAMPUS

Half-Day Camp Program 9:00 AM – 1:00 PM

Full-Day Camp Program 9:00 AM – 3:00 PM

Child's Name _____
 Address _____ City/State _____ Zip _____
 Phone _____ Date of Birth _____
 Parent #1 Name _____ Business Phone _____
 Parent #1 Email _____
 Business Address _____ City/State _____
 Parent #2 Name _____ Business Phone _____
 Parent #2 Email _____
 Business Address _____ City/State _____
 Pediatrician (Name & Phone) _____
 Allergies _____
 Sight, Hearing or Speech Defects _____
 Social Adjustments _____
 Emergency Contact _____ Phone _____
 Address _____ City/State _____
 Emergency Contact _____ Phone _____
 Address _____ City/State _____

*Please include Registration Fee (below in parentheses) with this application. This fee is refundable up to May 1, 2018. The Registration Fee is applied toward the final tuition. Full payment is due by June 1, 2018. No refunds will be given for absences, or for any other reason, during camp sessions. *Registration fee amounts indicated below in parentheses.*

PLEASE INDICATE BELOW YOUR WEEK AND SESSION CHOICES

Week of: June 25 ___ July 2 ___ July 9 ___ July 16 ___ July 23 ___ July 30 ___

CAMP FEES HALF DAY

___6 weeks (\$450)
 ___5 weeks (\$375)
 ___4 weeks (\$300)
 ___3 weeks (\$225)
 ___2 weeks (\$150)

CAMP FEES FULL DAY

___6 weeks (\$600)
 ___5 weeks (\$500)
 ___4 weeks (\$400)
 ___3 weeks (\$300)
 ___2 weeks (\$200)

Please note that enrollment is contingent on a TWO-WEEK MINIMUM. Additional weeks may be added.

If attending the week of July 2, you may deduct \$98 for the Full Day program or \$65 for the Half Day program.

Please forward your check and registration form to:

Christopher Academy, 1390 Terrill Road, Scotch Plains, New Jersey 07076