

Important Canfield Kids Registration Information

Thank you for showing interest in Canfield Kids Summer Camp. Below you will find all of our Weekly Themes, Events, and Trips. Please indicate the weeks your child will be attending Canfield Kids All trips include all ages, unless otherwise indicated. Availability for all trips will be contingent upon available bus seating, offered first to full time campers, next to 3-day a week campers, and finally half day and daily drop-ins. Trips are included in full time enrollment prices, but **NOT** all others. Canfield Kids reserves the right to close out **ANY** trip registration at any point during the summer. **NO** permission slips or payments will be accepted the morning of a trip, as we are required to pay all vendors and give final head counts **PRIOR** to the event date. In the event that there is availability for a trip due to cancellations we will post a sign-up and we will accept campers on a first come, first serve basis.

<input type="checkbox"/>	Week 1: June 21- June 25 Theme: Welcome Week Trips or Events: None 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45):_____
<input type="checkbox"/>	Week 2: June 28- July 2 Theme: Wonderful World of Animals Trips or Events: Rizzo’s Reptiles (on site) and Hackettstown Pool 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45):_____
<input type="checkbox"/>	Week 3: July 6- July 9 (4-Day week ONLY-closed on July 5 th) Theme: Red, White, and Blue Trips or Events: Statue of Liberty (2 nd grade and up) 4-Day (\$175):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45):_____
<input type="checkbox"/>	Week 4: July 12- July 16 Theme: Wet and Wild Week Trips or Events: Hackettstown Pool 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45):_____
<input type="checkbox"/>	Week 5: July 19- July 23 Theme: Star Sports Trips or Events: Pax Amicus Theatre: Beauty and the Beast 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45):_____

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<input type="checkbox"/>	July 26- July 30 Theme: Under the Big Top Trips or Events: Imagine That Museum (preschool-grade 1) and The Fun Plex (Grades 2-6) 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45
<input type="checkbox"/>	August 2- August 6 Theme: Science Week Trips or Events: Liberty Science Center and Mad Science Workshops (on site) 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45
<input type="checkbox"/>	August 9- August 13 Theme: Get Up and Move Week Trips or Events: Hackettstown Pool 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45
<input type="checkbox"/>	August 16- August 20 Theme: Island Aloha Trips or Events: Rockaway Lanes (Grades 2 and up) and Giggles Playstation (preschool-Grade 1) 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45
<input type="checkbox"/>	August 23- August 27 Theme: Wild, Wild West Trips or Events: Wild West City 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45
<input type="checkbox"/>	August 30- September 3 Theme: Goodbye Campers! Trips or Events: End of the Summer Picnic 5-Day (\$215):_____ 3-Day(\$125)_____ Half Day(\$99):_____ Daily (\$45

understand that I am locked into the indicated rate and that I am responsible for payment of the weeks I signed up for, regardless of attendance.

Parent Signature:_____ Date:_____



The Mine Hill Educational Foundation
Enhancing Educational Opportunities

Canfield Kids Enrollment Form
2010 Summer Camp

C H I L D	Name of Child				Date of Birth	
	Home Address					
	Age as of Camp		Grade in September 2010		Male/Female	

P A R E N T S	PARENT 1		PARENT 2	
	Name		Name	
	Home Phone		Home Phone	
	Cell Phone		Cell Phone	
	Home Address		Home Address	
	Email		Email	

W O R K	PARENT 1 WORK		PARENT 2 WORK	
	Place of Work		Place of Work	
	Work Phone		Work Phone	
	Work Address		Work Address	

P I C K U P	Who else is allowed to pick up your child?	
	Name, phone, and relation to child:	Name, phone, and relation to child:
	Name, phone, and relation to child:	Name, phone, and relation to child:



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	Is there any activities you feel your child should not participate in?
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Persons authorized to pick up your child and/or contact in case of emergency if neither parent is available to assume responsibility for the child.

E M E R G E N C Y	First person/number to call in case of emergency:			
	Name of Contact #1		Name of Contact #2	
	Phone		Phone	
	Relationship		Relationship	

D O C T O R	Child's Doctor	
	Telephone	

M E D I C A L	Medical Conditions: _____
	Allergies: _____
	Medicine(s) Child is Taking: _____
	Is your child up to date on immunizations? Yes _____ No _____
	<u>*If your child must take medication while at camp, you must complete "Permission to Administer Medication Form". Please see Camp Director to obtain this form.</u>

C U S T O D Y	Is there any kind of custody issue regarding your child? Yes _____ No _____
	If yes, please attach a copy of appropriate court order
	Name of any persons PROHIBITED from picking up your child: _____

As the legal parent/guardian of the above child, I attest that all the given information is correct.

Parent's Signature: _____ Date: _____