

# 2020 Summer Camp Registration Form



**ONLY ONE  
CHILD PER FORM**

199 Taunton Lake Rd. • Marlton, NJ 08053 • Ph: 856-596-4250 • Fax: 856-596-4004

Child's Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_

Register ONE child per form ONLY

Gender: \_\_\_\_\_ Grade NEXT September: \_\_\_\_\_

**ATTENTION** parents of campers entering PK/K: Hours for this age group are from 8:00 - 3:15. Extended Care is not available for PK/K.

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please indicate the enrollment option and dates desired:

- ☐ One Week Only - \$325/wk  
☐ 2-8 weeks - \$310/wk

Enrollment Dates (mark your weeks below):

- ☐ Week 1 - 6/22 ☐ Week 5 - 7/20  
☐ Week 2\* - 6/29 ☐ Week 6 - 7/27  
☐ Week 3 - 7/6 ☐ Week 7 - 8/3  
☐ Week 4 - 7/13 ☐ Week 8\* - 8/10

\*Closed July 4th for federal holiday

\*4 p.m. dismissal on 8/14

**PM Extended Care needed? Pick-up after 4pm**

ATTN: Extended Care is NOT available for campers entering grades PK-K. Hours for this age group are 8:00-3:15.

- ☐ Yes (\$25 per week - add to tuition total)  
☐ No, I will pick up before 4pm daily

AM Extended Care is included in tuition costs. Campers entering grades 1 and up may be dropped off as early as 7am at no additional charge. Campers entering PK & K may be dropped off by 8am at no additional charge, but no earlier.

Camp Tuition: \_\_\_\_\_ @ \$ \_\_\_\_\_ = \$  
# of weeks weekly rate

Early Registration Discount (5% off - register by 3/1) - \$

Early Payment Discount (5% off - pay in full by 3/1) - \$

10% Sibling Discount (apply to sibling attending fewest # of weeks) - \$

Total Tuition after Discounts: \$

PM Extended Care\* (pick up after 4pm): \_\_\_\_\_ @ \$25/wk = + \$  
# of weeks

\*There is no extended care available for campers entering PK & K. Hours for PK & K are 8:00-3:15 ONLY.

Total Camp Costs (tuition + extended care) \$

Amount Enclosed: (\$100 deposit due with form) - \$

Balance Due (6/1): ..... \$

## Payment Options:

☐ Check enclosed (please make checks payable to Camp Creek Run)

☐ Charge VISA/MC/AMEX # \_\_\_\_\_ Amount to charge \$ \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Name on Card \_\_\_\_\_ Signature \_\_\_\_\_

**Please PRINT and fill out ALL info. for EACH child. This is the emergency contact info. for our files.**

Parent 1 Name: \_\_\_\_\_ Parent 1 Home #: \_\_\_\_\_ Parent 1 Work #: \_\_\_\_\_

Parent 1 Cell #: \_\_\_\_\_ Parent 1 Email: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_ Parent 2 Home #: \_\_\_\_\_ Parent 2 Work #: \_\_\_\_\_

Parent 2 Cell #: \_\_\_\_\_ Parent 2 Email: \_\_\_\_\_

Billing Address (Please list ONLY if this address is different from camper address above): Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Please complete side 2 of this form.**  
**Registration is not complete without signature and required info on side 2.**

**Emergency Contacts & Pick-Up Authorization: List two contacts other than parent(s) and/or custodial parent. (We will attempt to contact the parent(s) first in the event of an emergency.)**

Emergency Contact #1 \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

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

Emergency Contact #2 \_\_\_\_\_ Relationship to Camper \_\_\_\_\_

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

**T-Shirt Size: Please mark the appropriate box for your child's T-shirt size .**

☐ Child XS    ☐ Child S    ☐ Child M    ☐ Child L    ☐ Adult S    ☐ Adult M    ☐ Adult L

**Additional Information:**

Is the applicant a returning camper?    ☐ Yes    ☐ No

Is the applicant a new camper?    ☐ Yes\*    ☐ No

***\*If yes, please tell us how you learned about us by checking a box below!***

☐ Friend or Acquaintance    ☐ School Handout    ☐ Internet    ☐ Flier in the Mail    ☐ Open House    ☐ Facebook    ☐ MetroKids

☐ Child's School Trip to Camp    ☐ Camp Fair (which one?) \_\_\_\_\_    ☐ Other: \_\_\_\_\_

**Describe any behavioral, developmental and/or neurological concerns, including school classification and clinical diagnoses. Advise if your child is assigned an aide during the school year, is in a self-contained classroom, or requires special assistance. If in a self-contained classroom, please list teacher/student ratio. (Note: Camp Creek Run is unable to provide one-to-one assistance or counselor/camper ratios beyond what is typical for summer day camp.) Attach a separate sheet as needed.**

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**Participation Agreement:**

I/We approve this application and certify that the applicant is independent and capable of such an experience. I/We grant permission for applicant to participate in all camp activities. I/We agree to pay camp tuition in full by June 1st and understand that our reservation cannot be held without payment in full. Refunds on balances paid, less the deposit, may be made up until June 1st. After June 1st, refunds will not be made. I understand that no refunds will be given in the event that the applicant leaves early due to sickness, homesickness, or disruptive behavior. I/We understand that the applicant cannot make up sick days. I/We understand that Camp Creek Run is not responsible for lost, stolen, or damaged personal articles. I/We authorize Camp Creek Run to have and use photographs, slides, and/or videotape of the applicant for media/public relations purposes (individual camper names will NOT be used without permission).

**PARENT/GUARDIAN SIGNATURE \_\_\_\_\_**

*By signing this form, I verify that I have read and agree to Camp Creek Run's policies and procedures which I have reviewed and understand are available at [www.CampCreekRun.com](http://www.CampCreekRun.com) or in writing by request.*