FCD SUMMER FUN CAMP AT EDISON

Mailing Address: PO Box 10453, New Brunswick, NJ 08906 Camp Location: 334 Plainfield Ave, Edison

Tel: 732-763-0357

Email: summercamp07@yahoo.com School Website: www.fcdschool.org

Enrollment Form

Camper's Last Name	First Name		
Date of Birth		Male	Female
Street Address			
City/State/Zip Code			
Home Phone #	Cell Phone		
Email: 1	; 2		
Mother / Guardian's Name	Father 's	Name	
Mother / Guardian's work #	Father's v	Father's work #	
Sessions desired:	Days desired:	Starting d	late:
1 session (2 weeks)	5 full days		
2 sessions (4 weeks)	3 full days		
3 sessions (6 weeks)	5 half days	Ending da	ate:
4 sessions (8 weeks)			
5 sessions (10 weeks)			
A \$200.00 deposit is required of each child at re	gistration time, plus a \$40.00 non-refund	able registration fee	is due with the enrollment form
Total due at registration is \$240.00. All deposit r	money is non-refundable after April 30, 20	012. All camp payme	ents are due on or before May 30
2012. Camper's healthy and vaccine information	n submitting to the camp before or on your	first camp day is req	uired by the State regulation.
Parent's/Guardian's signature		Date	
Camp Registrator		Date	