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	F	irst 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 work #		
In case of emergency, contact per	rson			
Contact number		Cell phone		
Sessions desired:	Days desired:			
1 session (2 weeks) 2 sessions (4 weeks)	5 full days 3 full days	Starting Date		
2 sessions (4 weeks) 3 sessions (6 weeks) 4 sessions (8 weeks) 5 sessions (10 weeks)	5 half days	Ending Date		
A \$200.00 deposit is required of each child a Total due at registration is \$230.00. All dep 2008 . Camper's healthy and vaccine inform	osit money is non-refundable	e after April 20, 2008 . All camp pa	yments are due on or before May 25,	
Parent's/Guardian's signature		Date		
Camp Registrator		Date		