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	Fi	rst 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 pe	erson			
Contact number	Cell phone			
Sessions desired:	Days desired:	Go Program desired:	SAT class:	
1 session (2 weeks)	<u> </u>	4 weeks	•	
2 sessions (4 weeks)	3 full days	8 weeks	8 weeks	
3 sessions (6 weeks)	5 half days		Math4weeks	
4 sessions (8 weeks)	3 half days		8 weeks	
5 sessions (9 weeks)				
A \$200.00 deposit is required of each child	at registration time, plus a \$30	0.00 non-refundable registration fee i	s due with the enrollment form.	
Total due at registration is \$230.00. All de	posit money is non-refundable	after March 31, 2007. All camp pays	ments are due on or before May 25	
2007. Camper's healthy and vaccine infor	mation submitting to the camp	before or on your first camp day is r	required by the State regulation.	
Parent's/Guardian's signature		Date		
Camp Registrator		Date		