

CRANBURY TOWNSHIP RECREATION  
23A North Main Street  
Cranbury, NJ 08512  
(609) 395-0900 x\*243  
www.cranburytownship.org



## 2017 SUMMER RECREATION CAMP PROGRAM INFORMATION AND REGISTRATION PACKET

### Senior Day Camp

Children Entering 5<sup>th</sup> - 8<sup>th</sup> Grades  
In September 2017



- ❖ **TWO TRIPS PER WEEK!!**
- ❖ **Maximum ratio of counselor-to-camper is 1-8 (may be lower).**
- ❖ **SWIMMING @ WEST WINDSOR WATERWORKS!**
- ❖ **CAMP HOURS ~ 8:30am - 3:00pm**
- ❖ **ONE WEEK REGISTRATION AVAILABLE (registration must be made the week prior to attending camp)**

## **Camp Information**

Please take time to read all of information provided. If you have any additional questions, call the Recreation Office at 395-0900 x \*243, secretary hours are Monday, Wednesday, Friday, 9:00am to 2:30pm.

Senior Day Camp will be held at the Cranbury School Gymnasium 8:30am – 3:00pm. It will be held in seven, one-week sessions, beginning Monday, June 26<sup>th</sup> and ending on Friday, August 11<sup>th</sup>. There will be no program on Tuesday, July 4<sup>th</sup>.

### **HOW TO REGISTER**

- Only one registration packet per student is needed.
- You can mail in the Registration Form or stop into Town Hall.
- Checks should be made out to “Cranbury Recreation” (Any registration received without payment will be returned.)
- PROGRAM CAPACITY - is limited to the first 40 registered children per week. Anyone registering after capacity is met will be placed on a waiting list.
- MEDICAL FORM - Each participant MUST complete and submit a Personal Health & Medical Record form prior to the start of camp or your child WILL NOT be permitted in camp.

### **ONE WEEK REGISTRATION AVAILABLE**

If registering weekly - registration must be made no later than 3:00 pm the Wednesday before the week you are registering for.

### **REFUND POLICY**

~~ No refunds will be issued for any camp session after June 2nd. ~~

### **RETURNED CHECK POLICY**

There will be a penalty fee of \$20 for each returned check by the bank for insufficient funds. To maintain registration in the program, payment must be made in cash to the Recreation Dept. in the amount of the returned check. Individuals who are penalized once for a returned check will be required to make all future payments for programs in cash.

### **FINANCIAL ASSISTANCE**

Those individuals seeking financial assistance should contact the Recreation Office prior to registration.

## **IMPORTANT INFORMATION**

### **PROGRAM DESCRIPTION**

This program is for children entering grades 5<sup>th</sup> – 8<sup>th</sup>. Children will take part in activities and programs appropriate for their age level. A typical camp day will consist of a wide variety of outdoor activities including an extensive sports program, creative arts and crafts, on-campus entertainment, fun-filled activities, with new and more trips!!

### **DROP OFF AND PICK UP POLICY**

- ❖ Drop off time for camp is 8:30 am.
- ❖ Pick up time is promptly at 3:00 pm.
  - A fine system for those who abuse pick-up times.
    - First Offense: Documented verbal warning
    - Additional Offenses:
      - Up to 15 minutes late: \$10.00
      - Up to 30 minutes late: \$20.00
      - Up to 45 minutes late: \$40.00
      - Up to 1 hour late: \$50.00

### **FOOD**

Please supply lunch and plenty of water for your child/children. We can't emphasize enough the importance of providing proper food and drink for your child as camp gets very hot during the summer months.

### **PICK UP AUTHORIZATION**

Please list the authorized people on the Personal Health & Medical Record form. It is essential that we have, in writing, a list of the names of people allowed to pick up your child.

### **TRIPS**

The Senior Day Camp program will take two trips per week. Trip fees are included in the registration fees. Trip dates and locations are located on the tentative trip schedule calendar located within this packet.

### **BRINGING PERSONAL ITEMS TO CAMP**

The Recreation Department does not encourage campers to bring in personal items from home. If your child does bring items to camp please label these personal items with your child's full name. The Recreation Department assumes no liability for items brought to camp from home and will not make any type of restitution for missing or damaged items.

# 2017 SENIOR DAY CAMP REGISTRATION APPLICATION

Child's Name \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Sex: \_\_\_\_\_ Age: \_\_\_\_\_ Grade Entering In September 2017: \_\_\_\_\_ (5<sup>th</sup> – 8<sup>th</sup> grades only)

Street Address: \_\_\_\_\_

City

State

Zip

Home Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

## **T-Shirt**

Each child will receive one camp T-shirt. **If registered after June 2 there is a \$10 fee for t-shirts.**

Youth - Small \_\_\_ Med \_\_\_ Large \_\_\_ Adult - Small \_\_\_ Med \_\_\_ Large \_\_\_ ExLrg \_\_\_

## **Week Enrollment**

Please check the appropriate week you are registering for.

### **Week**

### **Cranbury Resident**

### **Non Resident**

Week 1 (6/26-6/30)

\$195 \_\_\_\_\_

\$215 \_\_\_\_\_

Week 2 (7/3 -7/7) NO CAMP 7/4

\$170 \_\_\_\_\_

\$190 \_\_\_\_\_

Week 3 (7/10-7/14)

\$195 \_\_\_\_\_

\$215 \_\_\_\_\_

Week 4 (7/17-7/21)

\$195 \_\_\_\_\_

\$215 \_\_\_\_\_

Week 5 (7/24-7/28)

\$195 \_\_\_\_\_

\$215 \_\_\_\_\_

Week 6 (7/31-8/4)

\$195 \_\_\_\_\_

\$215 \_\_\_\_\_

Week 7 (8/7-8/11)

\$195 \_\_\_\_\_

\$215 \_\_\_\_\_

**Family Discount** (If applicable)

Less \_\_\_\_\_

n/a (Non Residents Do Not Qualify)

(LESS \$10 per week for 2<sup>nd</sup> child, \$20 per week for 3<sup>rd</sup> child, etc

TOTAL AMOUNT ENCLOSED \$ \_\_\_\_\_

**Refund/Late Registration Policy:** I have read the Refund Policy on the previous page and fully understand this policy. I am aware that absolutely no refunds will be issued after Friday, June 2, 2017.

\_\_\_\_\_  
Signature of Parent or Guardian of Participant

\_\_\_\_\_  
Date

Mail or drop this form off with payment to:  
Cranbury Recreation, 23A North Main Street, Cranbury, NJ 08512

# PERSONAL HEALTH AND MEDICAL RECORD FORM

If your child is registering for multiple sessions, you only need to complete this form once

This form is to be completed by the parent or guardian of the camper. The information requested will be kept on file at the camp in case of an emergency, accident or illness. This completed form must be returned to the Recreation Office prior to the start of the camp session enrolled in. No camper will be permitted to enter camp without the completed form being received in the Recreation Office.

Please do not take form to camp - mail to or drop off at the Recreation Office.

## PLEASE PRINT OR TYPE:

Camper's Name \_\_\_\_\_ Grade: \_\_\_\_\_  
Last First (as of Sept. current year)

Sex \_\_\_\_\_ M \_\_\_\_\_ F Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year

Address \_\_\_\_\_  
Street Town Zip

Home Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Father's Name \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Mother's Name \_\_\_\_\_ Work/Cell Phone \_\_\_\_\_

Camper's Physician \_\_\_\_\_ Physician's Phone \_\_\_\_\_

Physician's Address \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

**NOTE: Please no answering machine telephone #'s. Contact person should be someone other than the parents who can be reached in an emergency and can take care of the child if he or she becomes ill during a camp day.**

List any health related problems or concerns your child may have that the camp staff should be aware of: \_\_\_\_\_

Are there any restrictions on any activity? If yes, please explain \_\_\_\_\_

## **PICK UP AUTHORIZATION:**

My child will be picked up by: \_\_\_\_\_

or Name/Relationship Phone #

My child will walk home: \_\_\_\_\_

PARENT/GUARDIAN AUTHORIZATION To the best of my knowledge, information recorded above is correct and complete. I give my permission for my child to participate in all camp activities, except as specifically noted herein. In the event that I cannot be reached in an emergency, I hereby give permission to the closest Hospital to administer emergency treatment, and to order injection, anesthesia or surgery for my child. I further give my permission to release any information to the closest Hospital in order for treatment of my child. If there is a change in the above information, I will notify the Recreation Office promptly in writing.

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_



Senior Day Camp Trip Schedule – 2017  
(Grades 5<sup>th</sup> -8<sup>th</sup>)

Monday	Tuesday	Wednesday	Thursday	Friday
WEEK 1 – June 26  <b>FIRST DAY OF CAMP</b>	June 27  Great Adventure (4:00 pm return)	June 28  SWIM	June 29 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Funtime America	June 30  SWIM
WEEK 2 – July 3	4  <b>CAMP CLOSED INDEPENDENCE DAY</b>	5  Top Gun Paintball	6 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Rebounderz	7  SWIM
WEEK 3 – July 10  SWIM	11  New York Aquarium/Nathan’s Hot Dogs/ Coney Island Swimming (5:00 pm return)	12  SWIM	13 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Castaway Cove/Ocean Swimming	14  SWIM
WEEK 4 – July 17  Mountain Creek Water Park (4:00 pm return)	18	19  SWIM	20 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Liberty Science Center	21  SWIM
WEEK 5 – July 24  SWIM	25  Casino Pier & Breakwater Beach (5:00 pm Return)	26  SWIM	27 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Coco Keys	28  SWIM
WEEK 6 – July 31  SWIM	Aug 1  Mason Temple/Philly Duck Tour (5:00 pm Return)	2  SWIM	3 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Bridgewater Sports	4  SWIM
WEEK 7 – August 7  SWIM	8  Hurricane Harbor 4:00 Return	9  SWIM	10 (4 <sup>th</sup> – 8 <sup>th</sup> Graders)  Bowling East Windsor Dairy Queen	11  SWIM