Sandy Hollow Day Camp

Application for Enrollment 2018

Child's Last Name _____ First Name _____

Age _____ Grade in September _____ Sex _____

Parent Name _____

Winter Address _____

City _____ State _____ Zip _____

Summer Address _____

City _____ State _____ Zip _____

Winter Phone # _____ Summer Phone # _____

Cell Phone # _____ Email _____

Camper's Interests _____

Camper's T-shirt size (circle one) **Youth:** 2-4 6-8 10-12 14-16 **Adult:** S M L XL XXL

Full Day (ages 4 - 14)

Full Session (8 weeks) ☐
Any 4 Week Session *(circle weeks below)* ☐
Weekly Session *(circle weeks below)* ☐
Circle which weeks 1 2 3 4 5 6 7 8
Post Season Week (circle) 9

Half Day (ages 3 & 4)

Full Session (8 weeks) ☐
Any 4 Week Session *(circle weeks below)* ☐
Weekly Session *(circle weeks below)* ☐
Circle which weeks 1 2 3 4 5 6 7 8
Post Season Week (circle) 9

Transportation? Yes No

Circle which weeks 1 2 3 4 5 6 7 8 Post Season Week (circle) 9

Full Eight Week Session of Planned Activities for Boys and Girls (ages 4 - 14) **Hours: 9 am - 4 pm**

Camp Fee includes:

Camp T-Shirt & Visor
Camp Tote Bag
Special Events
Lunchtime Beverage
Field Trips
Morning & Afternoon Snack

Eight Week Session

June 25 to Aug 17 .....$3,900
Second Child.....$3,700
Any Four Week Session.....$2,300
Second Child.....$2,200
Weekly Rate.....$620
Daily Rate $160
Post Season Week (Aug. 20 - 24).....$620
May not be substituted for any other week.

Transportation

Weekly.....$180
Not available for half day programs

Half Day Programs (ages 3 & 4) **Hours: 9 am - 12:30 pm**

Eight Week Session

June 25 to Aug 17 .....$2,380
Second Child.....$2,280
Any Four Week Session.....$1,530
Second Child.....$1,430
Weekly Rate.....$430
Daily Rate $110
Post Season Week (Aug. 20 - 24).....$430
May not be substituted for any other week.

Please charge my credit card

Card: # _____

Exp. Date: _____ **CVC Code:** _____

AMEX ☐ MASTERCARD ☐ VISA ☐

Please make checks payable to: **Sandy Hollow Day Camp**

Campers must provide their own lunch, a bathing suit and towel daily. A $300 **($150 non-refundable)** deposit must accompany the application. The remainder of the fee is to be paid by June 1, 2018. **Enrollment after June 1, 2018 requires tuition paid in full.**

I give permission for (1) my child to be photographed for advertisement purposes. (2) to attend trips off the camp grounds and (3) to participate in the camp's swim program. In case of emergency and I cannot be notified, the camp has my permission to obtain medical treatment for my child. I hereby remove camp-site, staff, management and Sandy Hollow Day Camp from any and all liability for injury or damages incurred while involved with this program. **Camp will NOT be in session on Wednesday, July 4th in observance of Independence Day.**

_____ _____

Parent or Guardian Signature Date

P.O. BOX 1402 • SOUTHAMPTON, NEW YORK 11969 • (631) 283-2296 • WWW.SANDYHOLLOWDAYCAMP.COM