

## APPLICATION FOR SUMMER CAMP ENROLLMENT

	Date of enrollment:
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C	Name of Child		
H	Date of Birth	School Attends	
I	Grade in 2008		
L	Home Address		
D			

P	MOTHER	FATHER
A	Name	Name
R	Cell Phone ( )	Cell Phone ( )
E	Home Phone ( )	Home Phone ( )
N	Home Address	Home Address
T		

W	MOTHER WORK	FATHER WORK
O	Name of business	Name of business
R	Business phone	Business phone
K	Business address	Business address

Persons authorized to pick up your child and/or contact in case of emergency if neither parent is available to assume responsibility for the child.

E	Name of Contact #1	Name of Contact #2
M		
E	Phone	Phone
R		
G	Relationship	Relationship
E		
N	Address	Address
C		
Y		

D	Child's doctor
O	
C	Telephone # ( )
T	
O	Address
R	

C U S T O D I A N	Name of person PROHIBITED from picking up the child: _____ If a non-custodial parent is <u>not</u> included among those persons authorized by the custodial parent to pick up the child, please explain below and attach a copy of appropriate court order.
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E M E R G E N C Y	I have completed the medical emergency permission form which authorizes Allaire Country Day to seek emergency medical care for my child as deemed necessary by the Director or the director's designee.  Parent's signature: _____ Date _____
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P O L I C Y S	I attest that all of the information on this application is accurate, and that I have received and understand the following information for my (our) records.																					
	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">1. Policy on the Release of Children</td> <td style="width: 20%; text-align: center;">YES</td> <td style="width: 20%; text-align: center;">NO</td> </tr> <tr> <td>2. Philosophy of Discipline</td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>3. Policy on the Management of Illnesses/Communicable Diseases</td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>4. Health Record</td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>5. DYFS Form</td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>6. Camp Agreement</td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> <tr> <td>7. Completed Schedule</td> <td style="text-align: center;">YES</td> <td style="text-align: center;">NO</td> </tr> </table>	1. Policy on the Release of Children	YES	NO	2. Philosophy of Discipline	YES	NO	3. Policy on the Management of Illnesses/Communicable Diseases	YES	NO	4. Health Record	YES	NO	5. DYFS Form	YES	NO	6. Camp Agreement	YES	NO	7. Completed Schedule	YES	NO
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