

2010 MIDDLESEX COUNTY CAMP APPLICATION AND PARENT PERMISSION FORM

Complete a separate application form for **each Camper** (form may be duplicated). A deposit is required for each Camper per week or session.

Parent or Guardian Signature Required

Camper's Name: _____

Parent/Guardian Name: _____

Address: _____

Address: (if different) _____

Town: _____ State: _____ Zip: _____

Town: _____ State: _____ Zip: _____

Boy Girl Age: _____ DOB: _____

Telephone: [H] (____) _____ [W] (____) _____

Parent's Email _____

Parent's Cell: (____) _____

If parent cannot be reached in an emergency, who should we call?

Name: _____ Phone (____) _____

I hereby give permission for Camper to attend the Middlesex County Camp Foundation, Inc. 4-H Camp (the "Camp"), subject to the authority of the Camp Director and Camp Staff and I give permission for the Camper to participate in any planned in or out-of-camp activities under the supervision of the Camp Director or Camp Staff. I agree not to hold the Camp responsible for loss of money, jewelry, or personal articles brought to Camp by Camper. I also give permission for the use of any photograph of the Camper to be used in Camp public relations. I affirm that all personal and health information regarding the Camper provided to the Camp is true and correct to the best of my knowledge.

Signature of Parent or Guardian _____ **Date** _____

Camper would like to bunk with _____ (must be same age) (Campers are not guaranteed bunking or programming with this person).

Please "X" the boxes that apply to the weeks and programs your camper is requesting.

<input type="checkbox"/> General Camp		<input type="checkbox"/> Day Camp (REMINDER: Day Campers' week Starts on Monday)		<input type="checkbox"/> CIT Program			
<input type="checkbox"/> WEEK 1	<input type="checkbox"/> WEEK 2	<input type="checkbox"/> WEEK 3	<input type="checkbox"/> WEEK 4	<input type="checkbox"/> WEEK 5	<input type="checkbox"/> WEEK 6	<input type="checkbox"/> WEEK 7	<input type="checkbox"/> WEEK 8
Glow in Dark 6/20 – 6/25	MCC Idol 6/27– 7/2	Celebrate the Season Night at the Museum 7/4 – 7/9	Western Round-up 7/11 – 7/16	Mardi Gras 7/25– 7/30	Renaissance 8/1– 8/6	Tribal Week 8/8 – 8/13	
<input type="checkbox"/> Horse	<input type="checkbox"/> Horse	<input type="checkbox"/> Horse	<input type="checkbox"/> Horse	<input type="checkbox"/> Horse	<input type="checkbox"/> Horse	<input type="checkbox"/> Horse	<input type="checkbox"/> Horse
<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall	<input type="checkbox"/> Climbing Wall
<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry	<input type="checkbox"/> Rocketry
<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery	<input type="checkbox"/> Pottery
		<input type="checkbox"/> Girls Outpost	<input type="checkbox"/> Boys Outpost				

**** PLEASE NOTE: The camp reserves the right to cancel a program based on the level of participation****

Discounts: Sign up before April 1 save \$10.per wk

General Camp Wk 1-2 \$ 335.00	X	# of weeks =	\$ _____
General Camp Wk 3-8 \$ 375.00	X	# of weeks =	\$ _____
Day Camp Cost: \$ 250.00	X	# of weeks =	\$ _____
Horse Program Cost: \$ 150.00	X	# of weeks =	\$ _____
Climbing Wall Cost: \$ 30.00	X	# of weeks =	\$ _____
Rocketry: \$ 25.00	X	# of weeks =	\$ _____
Pottery : \$ 25.00	X	# of weeks =	\$ _____
Camp Photo Cabin: \$ 10.00	X	# of weeks =	\$ _____
All Camp Photo: \$ 10.00	X	# of weeks =	\$ _____
*CIT Program Cost: \$ 350.00	<input type="checkbox"/>	Session 1: Weeks 1-3	\$ _____
	<input type="checkbox"/>	Session 2: Weeks 5-7	\$ _____

Come **Overnite** WK 1 or 2 and save \$25 off wks 3-8



Total =	\$ _____
Early Bird Discount =	\$ _____
Wk 1 - 2 Discount =	\$ _____
50% Deposit Required =	\$ _____
Balance Due =	\$ _____

Make **Checks** payable to **M.C.C.F**