

**METUCHEN CHRISTIAN ACADEMY
CAMP MCA APPLICATION 2017
(Please Print)**

Camper's Last Name: _____ First Name: _____ Entering Grade: _____

Date of Birth: _____ Age: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone Number: _____ Email: _____

Mother's Full Name: _____

Work Phone Number: _____ Cell Number: _____

Father's Full Name: _____

Work Phone Number: _____ Cell Number: _____

In case parents are not available, please list two other emergency contact names and numbers:

Full Name: _____ Home#: _____ Cell#: _____ Work#: _____

Full Name: _____ Home#: _____ Cell#: _____ Work#: _____

PROGRAM DESIRED – Swim days will be twice a week. Camp trip days will be on Wednesdays.

• **Weekly Program**

Occasional Day Program (Circle the days you desire)

<input type="checkbox"/> June 12-16	M6/12	T6/13	W6/14	TH6/15	F6/16
<input type="checkbox"/> June 19-23	M6/19	T6/20	W6/21	TH6/22	F6/23
<input type="checkbox"/> June 26-30	M6/26	T6/27	W6/28	TH6/29	F6/30
<input type="checkbox"/> July 3-7	M7/3	T7/closed	W7/5	TH7/6	F7/7
<input type="checkbox"/> July 10-14	M7/10	T7/11	W7/12	TH7/13	F7/14
<input type="checkbox"/> July 17- 21	M7/17	T7/18	W7/19	TH7/20	F7/21
<input type="checkbox"/> July 24-28	M7/24	T7/25	W7/26	TH7/27	F7/28
<input type="checkbox"/> July 31-Aug 4	M7/31	T8/1	W8/2	TH8/3	F8/4
<input type="checkbox"/> Aug 7-11	M8/7	T8/8	W8/9	TH8/10	F8/11

- Drop Off Time: _____
- Pick up Time: _____ (on camp trip days do not pick up before 4:00pm)

• **Medical/Allergy Concerns**

1. List any allergies and/or medical problems:

2. List any medication your child requires: (Epipen, Benadryl, etc.)

Please make sure you provide medication in its original container or if the medication is in school, inform the office in writing and we will keep it for summer camp.

- Shirt Size (all campers will receive 1 camp T-shirt to wear for camp trips)

- Child's 6-8
 Child's 10-12
 Child's 14-16
 Adult Small
 Adult Med
 Adult Large
 Adult XL

Additional t-shirts are \$10

Camp waterproof bag (ideal for swimming and camp trips) \$14 – Camp bags are required for all camp trips.

- **Payment Schedule:**

You are responsible for paying for the days/weeks that you have requested prior to camp attendance. If you need to add a day, please check with the school office to see if there is availability.

All fees must be paid for June and July through FACTS (if your child is enrolled at MCA) on or before June 1st or with cash/check in the school office on or before June 5th .

August fees must be paid through FACTS (if your child is enrolled at MCA) on or before July 27th or with cash/check in the school office on or before August 1st.

Camp MCA will be closed on July 4, 2017 in observance of Independence Day.

Fees:

1. 9 Full Weeks: \$240.00 per week** (includes \$20.00 weekly camp trip fee)
2. Less than 9 weeks - Weekly Fee: \$255.00 per week** (includes \$20.00 weekly camp trip fee)
3. Daily Fee: \$55.00 per day (minimum 10 days scheduled) (add \$20.00 for Wednesday camp trip)
4. Daily campers will be able to "Make up Days" due to illness or emergencies for a \$20 additional fee as long as there is availability that day at camp.

****Please note: Due to the high expense of bus transportation and the fee for the various camp trips a \$20.00 fee will be charged (included in camp fees). Daily campers need to add the \$20.00 fee if scheduled for tripday.**

Please include the **\$50.00 EARLY REGISTRATION FEE** per camper (non-refundable and non-transferable) with this form. The fee is due by April 30th. Starting May 1st, the registration fee is \$100.00 per camper. Campers will be placed on a 2 week probationary period.

Camper's Name: _____ Entering Grade: _____

Camper's Name: _____ Entering Grade: _____

Mother's Signature: _____ Date: _____

Father's Signature: _____ Date: _____

Metuchen Christian Academy
130 Whitman Ave.
Metuchen, NJ 08840

Swimming/Pool Consent Form

(Please Print)

I, _____, give my permission for my son/daughter, _____
to use the following areas of the Metuchen Municipal Pool:

____ Kiddie Pool ONLY ____ 3 feet ONLY ____ Up to 4 feet
____ 5 feet ____ Sliding board ____ Diving board

____ Use all pool facilities provided that my child passes the deep water test. The test will be administered by a life guard and will only need to be taken once. It will consist of the following:

- Swimming 2 lengths of the pool in the 5 feet area
- Holding their breath under water for 10 seconds
- Treading water for 30 seconds.

If the deep water test is passed, you may choose to allow your child to use any or all of the above options.

Parent/Guardian Signature

Date

Camp Trip Consent Form

I, _____, give permission to the staff of Metuchen Christian Academy's Summer Camp to take my child/children on trips outside of the camp.

- The staff will exercise every reasonable precaution consistent with health care and safety regulations.
- The camp reserves the right to change any scheduled trips or activities.
- All campers must adhere to MCA's discipline guidelines and policies.
- The camp is not responsible for clothing or personal belongings that may be lost either on the camp premises, off the premises, or on trips.
- In the event of an emergency, if you or anyone you have listed cannot be reached, you hereby grant permission to the staff to take your child to the nearest hospital emergency room. The staff will first try to contact the parents or the emergency contact people listed on the medical form.
- All trips will be announced prior to the date of the trip. Campers must wear the MCA Camp T-shirt.
- Trips include anything that takes the camper off of Metuchen Christian Academy's premises either by walking to parks and pool or by bus/van.
- I give permission for my child's photo to be used in the camp literature and promotional materials.
- All campers **MUST** be dropped off at Metuchen Christian Academy before the trip is scheduled to depart or they will miss their camp day. Parents may not bring their camper to the camp trip site.

Parent/Guardian's Signature: _____

Date: _____