



New Community Corporation

Summer Camp 2012 Registration Form

Summer Camp Site Location:
NCC Neighborhood Center
56-68 Hayes Street Newark, N.J.

Please check if applicable:

Beforecare Aftercare PFP (Program for Parents)

I. Camper # 1 Information

Name _____ Age _____

Address _____ Apt/flr _____

City/State _____ Zip _____

Male or Female DOB ___/___/_____

Name of school child is attending? _____

What grade will student entering in September? _____

Camper # 2 Information

Name _____ Age _____

Address _____ Apt/flr _____

City/State _____ Zip _____

Male or Female DOB ___/___/_____

Name of school child is attending? _____

What grade will student be entering in September? _____

II. Parent/Guardian Information

Name _____ Relationship _____

Home Phone _____ Work Phone _____

Alt Phone _____ E-mail _____

Name _____ Relationship _____

Home Phone _____ Work Phone _____

III. Emergency Contact Information (Other Than Parent or Guardian)

Name _____ Relationship _____

Home# _____ Wrk# _____

Cell _____

Name _____ Relationship _____

Home# _____ Wrk# _____

Cell# _____

Has your child been enrolled in NCC Summer Day Camp before? Yes { } or No { }
If yes, when? _____

Parent Authorization and Consents

A. Authorization for Release of child

I hereby authorize this program to release my child to the following individual(s), if I am not available for pick up:

- 1. Name _____
Relationship _____
Address _____ / Phone# _____
- 2. Name _____
Relationship _____
Address _____ / Phone# _____
- 3. Name _____
Relationship _____
Address _____ / Phone# _____

Parent/Guardian Signature _____ Date _____

B. Consent to walk home

I hereby authorize my child to walk home from camp. I understand that my child will be walking home UNSUPERVISED and that NCC is not responsible for my child once dismissed from camp. I hereby waive any claims I may have against NCC, its affiliates, agents and employees and release same from any and all liability that may arise while my child walks home from camp.

NOTE: DO NOT sign this section if you DO NOT authorize your child to walk home from camp.

Time my child may be dismissed from camp to walk home ___:___ am/pm

Parent/Guardian Signature _____ Date _____

C. Consent of Emergency Care

I hereby authorize NCC Summer Camp staff to administer first aid to my Child if an emergency arises. This authorization is valid for the duration of my child's attendance in the program.

Parent/Guardian Signature _____ Date _____

Health Information

NOTE: The attached universal health form must be completed by you and your child's physician prior to registration.

Does your child have any allergies (food, hay fever, medications, etc)? { } Yes { } No
If so, please list:

Are there conditions or specific needs that require special attention: { } Yes { } No
If so, please list:

Will your child be taking medication during camp hours? If so, please list below. **Please note that summer camp staff is not authorized to administer medication other than emergency first aid.**

Medication: _____ Time: _____

Medication: _____ Time: _____

Other information you would like to share about your child (children)

Summer Camp 2012

My child will be attending the summer program the following weeks:

(Week 1) June 25th – June 29th _____ (week 5) July 23rd – July 27th _____

(Week 2) July 2nd – July 6th _____ (Week 6) August 6th – August 10th _____

(Week 3) July 9th – July 13th _____ (Week 7) Aug 1st – Aug 5th _____

(Week 4) July 16th – July 20th _____

*****No Camp July 4*****

Additional Services Needed

Beforecare (7:00am – 8:30am) Yes ___ No ___

Aftercare (4:30pm – 6:00pm) Yes ___ No ___

Before and Aftercare Yes ___ No ___

None of the above _____

Summer Camp 2012 Information Sheet

Camp Location:

NCC Recreation Center- 56-68 Hayes Street, Newark, NJ

Camp Dates: June 25, 2012 – August 10, 2012

Ages: 5 – 13 (**child must have completed kindergarten**)

Camp Times: 7:00 am – 8:30 am Before Care
8:30 am – 4:30 pm Regular Camp Hours
4:30 pm – 6:00 pm After Care

Camp Schedule: 8:30 am – 9:00 am Breakfast
9:00 am – 11:50am Academic Enrichment
12:00 noon – 1:00 pm Lunch
1:00 pm – 4:15 pm Afternoon Activities

Meals: Camp participants will receive breakfast, lunch and snack daily at no additional cost.

Trips: *Trips will be scheduled weekly, most are included in the camp fee. However; some will require an additional charge. Trip schedule will be available May 14, 2012*

Camp Fees: Registration fee - \$30.00 per child (non-refundable)

Weekly Fees:

1 child - \$80.00
2 children - \$150.00
3 children - \$220.00
4 children - \$290.00

Before or After care - \$5.00 weekly per service/per child

****No slot will be held unless registration fee is paid****

Applications should be mailed or delivered to:

NCC Department of Youth Services
56-68 Hayes Street Newark, NJ

For more information contact (973) 242-7934