

Upper Dublin Christian Nursery School

CAMP 2019  
REGISTRATION FORM

**\*Daily fee is \$35 from 9 to 12 noon**

**\*\*CIRCLE DAYS attending\*\***

**\*\*Optional lunch hour until 1 p.m. \$10, sign up daily or weekly\*\***

Week 1: 6/17 to 6/21-**Splish Splash!**

M T W TH F \$ \_\_\_\_\_

Week 2: 6/24 to 6/28- **Under The Sea**

M T W TH F \$ \_\_\_\_\_

Week 3: 7/1 to 7/5

**NO CAMP FOR HOLIDAY**

Week 4: 7/8 to 7/12 **Build It!**

M T W TH F \$ \_\_\_\_\_

Week 5: 7/15 to 7/19- **Fairies, Friends and Monsters!**

M T W TH F \$ \_\_\_\_\_

Week 6: 7/22 to 7/26- **Gardening**

M T W TH F

Week 7: 7/29 to 8/2-**Space** \$ \_\_\_\_\_

**M T W TH F**

**TOTAL:** \$ \_\_\_\_\_

\$100 Deposit (Subtract from balance due) (\$ \_\_\_\_\_)

Balance Due by start of camp! \$ \_\_\_\_\_

**REGISTRATION AND DEPOSIT DUE BY MAY 18TH**

**\*Submit registration and deposit by 5/10/19 & camp will be discounted to \$30 a day! Refer a New Friend and receive an additional incentive!**

\*\*Closed, Week 3

\*\*\*weekly payment available, checks payable to udlc ,or pay on line !

CAMPER INFORMATION

(Please use one form PER CAMPER)

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone: \_\_\_\_\_

Allergies or Medical Information: \_\_\_\_\_

Contact us at [UDchristiannurseryschool@gmail.com](mailto:UDchristiannurseryschool@gmail.com)

Website: [udcns.org](http://udcns.org)

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