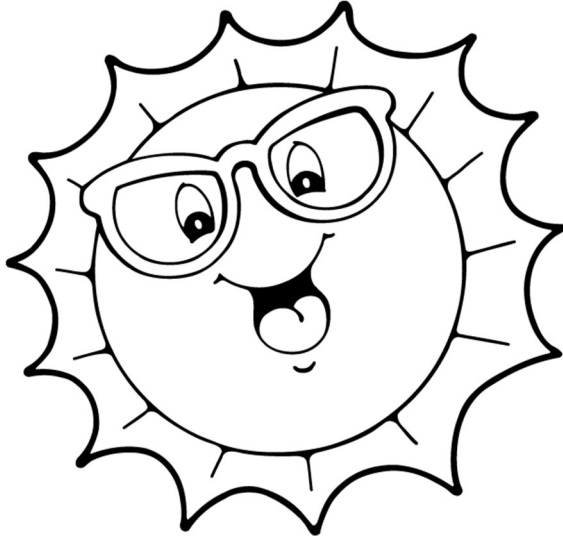


The Pre-School at
Doylestown United Methodist Church
320 E. Swamp Road
Doylestown, PA 18901
215-345-9775



SUMMER CAMP 2017

Every day your camper will enjoy:
Arts and Crafts, Music, Themed activities,
Games, Water Play, Stories and more!

Featuring Weekly Themes:

May 30 – June 2 ~ **Jungle Jaunts**

In the thick green grasses, we can see lots of animals and their families!

\$105 per child

June 5-9 ~ **Disney Classics**

Hey there, hi there, ho there! Friends from Disney are everywhere!

\$115 per child

June 12-16 ~ **Beach Bonanza**

Hope you have your sunblock packed for this blast of fun in the sun!

What kind of delights can you find at the beach – maybe a treasure map leading to lots of surprises!

\$115 per child

Registration fee: \$10.00
(one registration fee per family)

**** Camp is open to 3-6 year olds *with prior school experience* ****
(ALL campers must be potty trained : NO “Pull-ups” allowed)

Monday through Friday: 9:00 am-12:00 pm

Snack provided, please bring a bag lunch
(NO peanuts or tree nuts)

Space is Limited: REGISTRATION IS ACCEPTED ON A FIRST COME – FIRST SERVED BASIS.

SUMMER CAMP 2017

Notes to Notice for Parents:

1. WHAT TO WEAR TO CAMP:

- ◆ Sunscreen! Please apply sunscreen prior to camp.
- ◆ **Bathing suit** under shorts and shirt, or bathing trunks and a shirt. **NO "Pull-ups" allowed.**
- ◆ **Shoes** should be easy to get on and off (water shoes are acceptable)
- ◆ A **towel**
- ◆ A sun cap or **hat** is suggested.
- ◆ No backpacks, please.

2. LABEL EVERYTHING your child brings to camp, including shoes, towels, clothes worn over bathing suits and lunches.

3. LUNCH: Bring a lunch to camp for your child every day. Lunches are not refrigerated or heated up. We provide a mid-morning snack. **All lunches must be peanut-free and tree nut-free.**

4. ARRIVAL: Camp begins promptly at 9:00 am.

- ◆ Park in our main parking lot and walk your camper to the Main Entrance of the Church.
- ◆ **All campers MUST be signed in.**

5. DISMISSAL: Camp ends promptly at 12:00 pm.

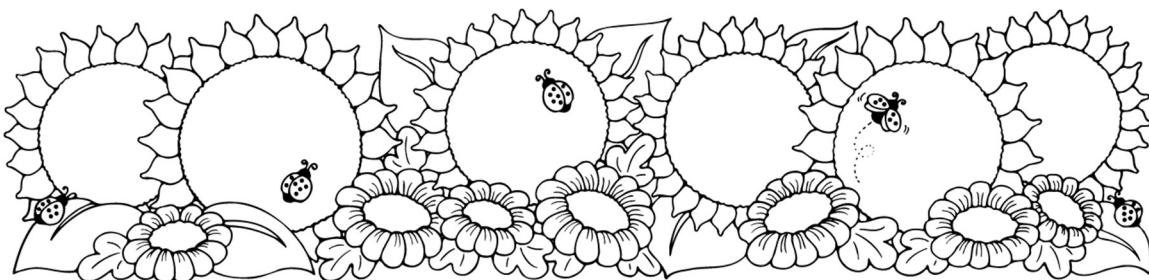
- ◆ Children **MUST** be signed out using the same sheet from the morning.
- ◆ Parents are asked to wait outside the Main Entrance and your child will be dismissed to you after sign out.

6. REGISTRATION & CONFIRMATION:

- ◆ **Enrollment will be on a first come, first serve basis.**
- ◆ Submit your completed registration & emergency contact form,
- ◆ **AND** your full payment for the camp week.
- ◆ Your group leader will contact you the week prior to your selected week.

We hope every day at camp is special for your child.
Remember, camp is a place to learn, explore and achieve, but most of all, have fun!

PLEASE KEEP THIS PAGE FOR YOUR REFERENCE



The Pre-School at
Doylestown United Methodist Church
SUMMER CAMP 2017

**** ACCEPTED ON A FIRST COME – FIRST SERVED BASIS ****

REGISTRATION OPENS FEBRUARY 1st and IS DUE BY MAY 15TH

A registration fee of \$10 per family *and* the weekly tuition is due NOW,
 payable to the *Pre-School at DUMC*.
The registration fee is NON-REFUNDABLE

Children must be between 3-6 years old, toilet trained (no "Pull-ups" allowed)
 and have prior pre-school experience.

The emergency contact form on the reverse side **MUST be completed.**

Please fill out a separate form for each child you are registering.

Child's Name: _____

Birthdate: _____ M: _____ F: _____

Parent's names: _____

Address: _____

City, State, Zip _____

Telephone: Home _____ Cell _____

Current teacher at DUMC: _____

Current preschool (if not DUMC): _____

Please check which week(s) your child will be attending:

	Week:	Theme:	Tuition:
_____	May 30- June 2	Jungle Jaunts	_____ 105.00
_____	June 5-9	Disney Classics	_____ 115.00
_____	June 12-16	Beach Bonanza	_____ 115.00
		Registration Fee:	_____ 10.00
		(ONE PER FAMILY)	
		Total Due Upon Registration:	_____

Please list any friends of your child who will be attending camp: _____

SUMMER CAMP 2017

Emergency Contact Information

List at least 2 emergency contacts (**other than parent or guardian**).

These contacts should be available during the day and reside locally.

1. Name _____
Relationship _____
Home# _____ Cell# _____

2. Name _____
Relationship _____
Home# _____ Cell# _____

Authorization:

I attest that the above named persons have my permission to act on my behalf in the event of an emergency concerning my child. I also grant permission to the Doylestown United Methodist Pre-School Camp Staff to transport my child by private vehicle, or ambulance, to receive prompt medical treatment in the event of an emergency.

Parent/Guardian Signature: _____

Print name: _____

During camp time: phone #: _____

cell #: _____

List any conditions, allergies, or concerns you feel we should be aware of regarding your child:

Please send this completed page with your **full** payment to:

- Summer Camp -
The Pre-School at DUMC
320 E. Swamp Road
Doylestown, PA 18901