

Summer Camp Registration Form

Summer Camp June 20- August 12, 2011 -Closed Monday July 4, 2011

***Camp is \$60.00/week/child.**

***Payments must be made weekly and are due on a Monday.**

Child's Name _____ Age _____

Address _____

Phone _____ Grade (11-12 school year) _____

Parent's Name _____

Work Phone _____ cell phone _____

Emergency Contact _____

Emergency Phone _____

Please list any food allergies: _____

Any medical conditions: _____

Does your child take any prescription drugs*? _____

If yes, please list: _____

*Please note: Prescription drugs will not restrict your child from participating in camp, however, we are not certified to dispense medication to your child.

Is your child able to swim confidently on their own? _____ If not, would they benefit from basic swimming lessons? _____

Please check your child's interests:

Swimming _____

Cooking _____

Tennis _____

Arts & Crafts _____

Athletic Games _____

Fitness _____

Reading _____

Table games _____

Please indicate child's shirt size (circle one): Youth- S M L XL

Adult- S M L XL

*Please return this form and \$30/child non refundable activity deposit to:

(* Activity fee covers the cost for your child to participate in 3 trips and their t-shirt.)

City of Reading Recreation Office

Attn: Summer Camp

320 S. 3rd St.

Reading, Pa 19602

2011 Camp calendars will be mailed at the beginning of June.

Camp hours: Monday – Friday 8:30-4:30.

Please note: you will have to provide lunch for your child this summer.
Snacks will be provided.