

Weekly Themed Sessions

Registration for Summer Camp for Young Children Summer 2025

Child's Name	M o	or F Birth Date
Home Address		
City	State	Zip
Parent 1 Name		
Daytime Phone #	Email	
Parent 2 Name		
Daytime Phone #	Email	
PLEASE CHECK ANY THAT MAY APP	PLY:	
Current student at Geneva Day S	School	
New student enrolled at Geneva	Day School for the upcoming s	school year
Student attends a school o <mark>ther th</mark>	n <mark>an</mark> Geneva Day School:	
Registering two or more campers	s from the same family (10% di	scount <mark>for you</mark> ngest child)
Parent/Guardian is an active mer	m <mark>ber of Geneva Presbyteria</mark> n C	Church (25% d <mark>iscount</mark> per child)
Parent/Guardia <mark>n is a</mark> n active mer	mb <mark>er of the U.S. Militar</mark> y an <mark>d/or</mark>	First Responder (10% discount per child
 I give my child permission to particip 	<mark>ate in</mark> water pla <mark>y ac</mark> tivities dur <mark>ir</mark>	<mark>ng su</mark> mmer campY orN
 Geneva Day School Summer Progra 	<mark>am</mark> and/or Gene <mark>va D</mark> ay School	h <mark>as m</mark> y/our permission to use my child's
likeness for school purposesY	orN	
 I authorize Geneva Summer Prograr 	n staff to re-apply sunscreen a	nd bug spray to my childY orN
Parents must provide sunscreen and	d Bug Spray in a Ziploc bag cle	arly labeled with the child's name.
Signature of Parent/Legal Guardian:		Date

Submitted registration forms are under the assumption that all fees be paid in full by March 3rd, 2025. The parents' signature represents a binding agreement.

Once camp fees are paid, 75% is refundable if a camper withdraws up to 30 days before the session starts. No fees are refunded due to vacation, illness, non-attendance, or withdrawal less than 30 days prior to the beginning of the session.



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Emergency Contact Information and Health History Summer 2025

The following form is only for children 3½ years and older by June 1, 2025. Campers between 2 years old and 3 years 6 months old at the start of their session will be sent the required forms separately.

Child's Name		
The following information is required:		
1 st Emergency Contact:		Phone:
(Parent/Leg	gal Guard	<mark>dian)</mark>
2 nd Emergency Contact:		Phone:
(Other than th	e pers <mark>on</mark>	above)
Child's Physician:		Phone:
HEALTH INFORMATION		
1. Has the Child ever received any developmental, e Toddlers or Child Find? Yes No <i>If yes, pl</i>		
2. Has the Child ever received or is currently received Permission to contact child's therapist(s):Yes If yes, please provide contact information:	No	nerapy servic <mark>es (speech, occupational, etc.</mark>)?Yes N
3. Are there any health problems, including physical aware? Yes No If yes, please explain:		tric, or behavioral p <mark>robl</mark> ems, of which we need to be
4. Are there any medications, dietary restrictions, all child's camp experience is positive?Yes Yes	_No	r special needs we need to be aware of to ensure that you
IMMUNIZATION INFORMATION		
For campers who reside within the United States or a U.S. territory:	OR	For campers who reside outside of the United States or a U.S. territory:
1. State or territory in which the child resides:	⇔	1. Country in which the child resides:
2. Is this child exempt from any immunizations? □ No □ Yes If yes, please list them:		2. Attach Department form DHMH-896 (record of vaccination or immunity)
Signature of Parent/Legal Guardian:		Date:



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Session	Dates	5 Days Half-Day Program	5 Days Full-Day Program	Before Care**	After Care**
		9:00 a.m 12:30 p.m.	9:00 a.m 3:00 p.m.	From 8:00 a.m.	From 3:00 - 4:30 p.m.
		\$350	\$500		
1	June 2 - 6				
2	June 9 - 13				
3*	June 16 - 20*				
4	June 23 - 27				
5*	June <mark>30 - Jul</mark> y 4*				
6	July 7 - 11				
7	July 14 - 18				
8	July 21 - 25				
9*	July 28 - August 1*				

Full-day programs are only available for children who are 2½ years and older by June 1st, 2025.

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^{**}Extended Care fees are based on \$20 an hour.

^{**}Before Care and After Care is available by reservation only and will be cancelled at any time due to lack of enrollment.

^{**}Before and After Care will only be available once staffing is confirmed.

^{*}Session 3 is a four-day week for all campers. If you register for Half-Day, the cost will be \$280 & Full-Day the cost will be \$400. Closed June 19th.

^{*}Session 5 is a four-day week for all campers. If you register for Half-Day, the cost will be \$280 & Full-Day the cost will be \$400. Closed July 4th.

^{*}Session 9 is a four-day week for all campers. If you register for Half-Day, the cost will be \$280 & Full-Day the cost will be \$400. Closed August 1st.