

## WEEKLY THEMES

July 1–5\* America the Beautiful

July 8–12 Animal Kingdom

July 15–19 Around the World

July 22–26 Hawaiian Holiday

July 29–Aug 2 Sports 'R' Us

Aug 5–9 Vacation Bible School

Aug 12–16 Under the Sea

Aug 19–23 Outer Space

## MISSION STATEMENT

Calvary Academy exists to equip students to develop a genuine relationship with Jesus Christ, and intellectually prepare them to live their lives with a Biblical perspective.

REGISTRATION AVAILABLE ONLINE:

<https://www.calvaryacademy.org/current-families/summer-camp/>

## CALVARY ACADEMY

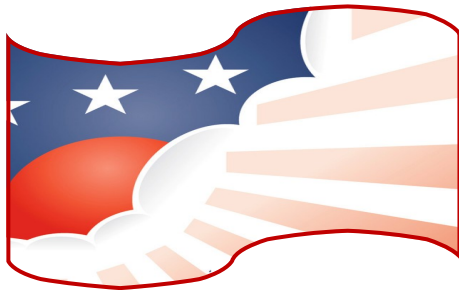
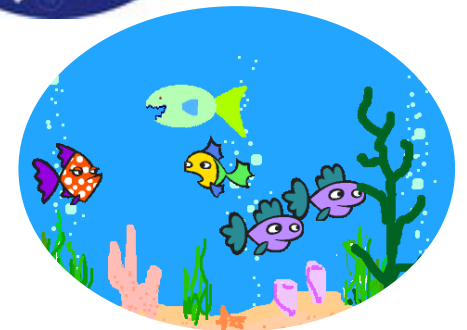
1133 E. County Line Rd.

Lakewood, NJ 08701

732-363-3633

CALVARY ACADEMY

SUMMER CAMP  
2019



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[www.calvaryacademy.org](http://www.calvaryacademy.org)

# SUMMER CAMP 2019 AGES 3-11



## SELECT WEEKS

Child 1: Full Name \_\_\_\_\_ M/F \_\_\_\_ Birthdate: \_\_\_\_\_ Grade in Sept. \_\_\_\_\_  
 Allergies/Medical Conditions: \_\_\_\_\_  
 Child 2: Full Name \_\_\_\_\_ M/F \_\_\_\_ Birthdate: \_\_\_\_\_ Grade in Sept. \_\_\_\_\_  
 Allergies/Medical Conditions: \_\_\_\_\_  
 Child 3: Full Name \_\_\_\_\_ M/F \_\_\_\_ Birthdate: \_\_\_\_\_ Grade in Sept. \_\_\_\_\_  
 Allergies/Medical Conditions: \_\_\_\_\_  
 Address where child resides: \_\_\_\_\_  
 Name of parent(s) child lives with: \_\_\_\_\_ Email \_\_\_\_\_  
 Parent 1 cell phone \_\_\_\_\_ Parent home phone \_\_\_\_\_ Work # \_\_\_\_\_  
 Parent 2 cell phone \_\_\_\_\_ Parent home phone \_\_\_\_\_ Work # \_\_\_\_\_  
 Emergency Contacts and Permission to Pick-Up:  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_  
 Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Select Week(s)	5 Day	3 Day	Before Care	After Care
Wk 1: July 1-5 *				
Wk 2: July 8-12				
Wk 3: July 15-19				
Wk 4: July 22-26				
Wk 5: July 29-Aug 2				
Wk 6: Aug 5-9				
Wk 7: Aug 12-16				
Wk 8: Aug 19-23				

\* CLOSED on July 4th

Notes: Children must be potty trained. If your child is prescribed an Epi-pen, 2 Epi-pens must be provided in order for your child to participate in this program, and staff trained in administering Epi-pens have permission to treat with the Epi-pen if needed. Field trips are at an additional cost. Registrants need not be Calvary Academy students. **Parent Signature** \_\_\_\_\_

COMMENTS: \_\_\_\_\_

### PRICE LIST based on 9:00-3:00 Day

◆ WEEKLY RATE: \$175 (M-F)

◆ 3 DAY WEEK: \$115 (M, W, F)

Field trips are an additional charge

Before Care 8:00-9:00:

\$6.00 minimum

After Care 3:00-5:00:

\$6.00 per hour, \$6.00 minimum

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 PAYMENTS: Payments due monthly in advance, as follows:

• For June, by May 17

• For July, by June 7

• For August, by July 12

• Checks should be made out to Calvary Academy  
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I agree to all provisions herein. I understand there are no refunds for missed days I have paid for, regardless of reason for absence. I agree to hold harmless Calvary Academy/Calvary Lighthouse, its affiliated organizations, employees, agents, representatives, volunteers and drivers, from any and all claims arising from my child's participation in this program and field trips. In case of accident, illness, or other emergency, I give permission for staff to call emergency services or a licensed physician or dentist even if I am not able to be reached. I authorize and consent to any medical treatment deemed advisable in the best judgment of emergency services, a licensed physician or dentist. I agree to assume the financial responsibility for expenses incurred as a result of such services and for emergency medical transportation.

**Parent Signature** \_\_\_\_\_

Date \_\_\_\_\_ **Registration DUE by May 10**

\$175 Deposit Due upon Registration