## BROOKHAVEN COUNTRY DAY CAMP

Div. of Sunshine Camp Corp.

## LONG ISLAND AVENUE, YAPHANK, NY 11980

(631) 924-4033

**ENROLLMENT AGREEMENT** 

Fax - (631) 924-4416

e-mail – info@brookhavendaycamp.com

Check if

OFFICE USE ONLY

PRESENT

www.brookhavendaycamp.com

## SUMMER 2022 ENROLLMENT AGREEMENT OUR 54th YEAR

(first name) (last name)		X	DATE OF BIRTH	SHIRT SIZE	AS OF TODAY	first year camper	Group	TRANS	
1 <sup>ST</sup> CHILD	М	F				(_)		CARD	
2 <sup>ND</sup> CHILD*	M	F							
3 <sup>RD</sup> CHILD*	M	F				$\Box$			
* 2 <sup>ND</sup> , 3 <sup>RD</sup> CHILD, ETC., DISCOUNT: 4 W	/EEKS - \$200; 5 V	VEE	KS \$250; 6 W	VEEKS - \$	300; 7 WEEKS \$350;	8 WEEKS -	\$400	_	
HOME ADDRESS	TOWN				ZIP			_PHONE	
E-MAIL ADDRESS (required)									
SUMMER ADDRESS		TOWN			ZIP		PHONE		
(if different)					BUS.			CELL	
MOTHER'S NAME HOME AD									
FATHER'S NAME HOME AI	erent)				BUS.		CELL		
FATHER'S NAME HOME AL	Terent)				PHONE		_ PHONE		
IN EMERGENCY CALL: (OTHER THAN PARENTS)  1						TELEPHONE NO.		CELL PHONE	
2.									
5 WEEKS () (NU 6 WEEKS () FU 7 WEEKS () (2^N 8 WEEKS () PLEASE CIRCLE EACH WEEK ATTENDING LUNCH PROGRAM - SEE MENU YES ( ENCLOSE CHECK OR MONEY ORDER OR	ILL DAY URSERY THRU LL DAY  G GRADE THI G - wk 1 wk  NO (_)  FILL IN CRED	CIR FII RU 6 2	CLE DAYS  () M  RST GRAD  () M  5TH GRADE  wk 3 wk  TRANSPO  CARD INFO	T W E AS OF T W E AS OF S 4 wk ORTATIO	PRE TH F JUN 7 9/2022) TH F CIT 9/2022) 5 wk 6 wk 7 ON YES () N ON BELOW:	wk 8	N (_	* TWO WEEL SESSIONS MUSE (CONSECUTIVE)	
CAMP FEE \$ DEPOSIT	\$	_ I	BALANCE	\$				CONSECUTIV	
CREDIT CARD CREDIT C	REDIT CARD #EXP. DATE					·			
In the event of nonpayment of fees, I agree to pa photographs or video to be used in advertising, trips which may be part of the camp's regular p No refunds or make-up days due to illness or an as follows: During the 1 <sup>st</sup> week - 30%, during th	brochures, etc.; rogram. A \$100 y absences. Can	and per cella	for my chil child regis ations of les	d(ren) to tration fe ss than a	participate in camp e will be charged fo 4 week period will l	o field trips or cancellat oe charged	, late nigi ions occu a percent	hts and rainy day arring after May 1 t of the 8 week pri	

PARENT'S SIGNATURE

DATE

The camp is required to be licensed by the Suffolk County Dept. of Health Services and to be inspected twice yearly. Inspection reports concerning the camp are filed at the Suffolk County Dept. of Health Services, District Office, Housing and General Sanitation Unit (Yaphank, New York).

additional 10 percent due Jan. 31, 10 percent due March 31. The balance is due June 1, 2022. Changes in weeks or days after June 1<sup>ST</sup> will be

charged \$100. I understand that the camp reserves the right to cancel this agreement at any time for any reason.