

# BROOKHAVEN COUNTRY DAY CAMP

Div. of Sunshine Camp Corp.

LONG ISLAND AVENUE, YAPHANK, NY 11980

(631) 924-4033 Fax - (631) 924-4416 e-mail – info@brookhavendaycamp.com

www.brookhavendaycamp.com

## SUMMER 2021 ENROLLMENT AGREEMENT

### OUR 53rd YEAR

ENROLLMENT AGREEMENT		SEX		DATE OF BIRTH	SHIRT SIZE	PRESENT SCHOOL GRADE AS OF SEPT. 2021	Check if first year camper	OFFICE USE ONLY	
(first name)	(last name)	M	F				( )	Group	TRANS CARD <input type="checkbox"/>
1 <sup>ST</sup> CHILD		M	F				( )		
2 <sup>ND</sup> CHILD*		M	F				( )		
3 <sup>RD</sup> CHILD*		M	F				( )		

\* 2<sup>ND</sup>, 3<sup>RD</sup> CHILD, ETC., DISCOUNT: 4 WEEKS - \$200; 5 WEEKS \$250; 6 WEEKS - \$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 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ PHONE \_\_\_\_\_  
(if different) BUS. CELL

FATHER'S NAME \_\_\_\_\_ HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_ PHONE \_\_\_\_\_  
(if different)

IN EMERGENCY CALL: (OTHER THAN PARENTS) RELATIONSHIP TELEPHONE NO. CELL PHONE  
1. \_\_\_\_\_  
2. \_\_\_\_\_

JUNE 28 THRU AUGUST 20 – CLOSED MONDAY JULY 5

#### CHECK APPROPRIATE WEEKS

2 CONSECUTIVE WEEKS\* ( )  
3 WEEKS ( )  
4 WEEKS ( )  
5 WEEKS ( )  
6 WEEKS ( )  
7 WEEKS ( )  
8 WEEKS ( )

#### CHECK APPROPRIATE PROGRAMS

(CIRCLE DAYS)  
FULL DAY ( ) M T W TH F  
(NURSERY THRU FIRST GRADE AS OF 9/2021)  
FULL DAY ( ) M T W TH F  
(2<sup>ND</sup> GRADE THRU 6<sup>TH</sup> GRADE AS OF 9/2021)

PRETEEN ( ) (grade 7)  
JUNIOR TEEN ( ) (grades 8&9)  
CIT ( ) (grades 9 &10)

PLEASE CIRCLE EACH WEEK ATTENDING - wk 1 wk 2 wk 3 wk 4 wk 5 wk 6 wk 7 wk 8

NO CAMP LUNCH PROGRAM IN 2021 TRANSPORTATION YES ( ) NO ( )

ENCLOSE CHECK OR MONEY ORDER OR FILL IN CREDIT CARD INFORMATION BELOW:

CAMP FEE \$ \_\_\_\_\_ DEPOSIT \$ \_\_\_\_\_ BALANCE \$ \_\_\_\_\_

CREDIT CARD \_\_\_\_\_ CREDIT CARD # \_\_\_\_\_ EXP. DATE \_\_\_\_\_

**\* TWO WEEK SESSIONS MUST BE CONSECUTIVE**

In the event of nonpayment of fees, I agree to pay all court and attorney costs to Brookhaven Country Day Camp. I grant permission for any photographs or video to be used in advertising, brochures, etc.; and for my child(ren) to participate in camp field trips, late nights and rainy day trips which may be part of the camp's regular program. A \$100 per child registration fee will be charged for cancellations occurring after May 1<sup>st</sup>. No refunds or make-up days due to illness or any absences. Cancellations of less than a 4 week period will be charged a percent of the 8 week price as follows: During the 1<sup>st</sup> week - 30%, during the 2<sup>nd</sup> week - 50%, during 3<sup>rd</sup> or 4<sup>th</sup> week - 62%. Payment schedule: All payments due by June 1, 2021. 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.

\_\_\_\_\_  
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).