

# DAY CAMP 2010 Pre-registration

**Hi-Hills Camp**  
Summer Day Camp  
at Gill St. Bernard's School



PO Box 604 - Gladstone, NJ 07934  
Phone: 908-234-0067  
Fax: 908-234-0045  
Email: hihills@gsbschool.org

## CAMPER INFORMATION

Camper Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

School: \_\_\_\_\_ Grade in School (Fall 2010): \_\_\_\_\_ Years at Hi-Hills (include this year): \_\_\_\_\_

Grouping:  Place my child in Kindercamp (ages 3,4,5)  Place my child in Day Camp (entering 1<sup>st</sup> grade and up)

Please Group With: \_\_\_\_\_ Referred to Camp by: \_\_\_\_\_  
(NEW CAMPERS ONLY)

How did you hear about Hi-Hills? \_\_\_\_\_

Anticipated Shirt Size: **Youth:** S(6-8) M(10-12) L(14-16) **Adult:** S M L XL

## PARENT INFORMATION *(Invoice will be sent to both parents unless otherwise noted)*

Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

If there is a custody order, please provide. \_\_\_\_\_

## EMERGENCY INFORMATION

Physician Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**In the event we cannot be reached please contact:**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

## TRANSPORTATION

Please provide bus transportation.  To and From Camp  AM Only  PM Only  No Transportation

Pickup/Drop-off Address: \_\_\_\_\_

Nearest Intersection: \_\_\_\_\_

Is a Booster Seat or Car Seat Required? (Parents must provide)  Yes  No

## COMMENTS/REQUESTS/SPECIAL NEEDS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Pre-registration Prices expire October 1  
PLEASE SELECT ALL WEEKS OF ATTENDANCE**

	1	2	3	4	5	6	7	8
Week	6/28	7/5	7/12	7/19	7/26	8/2	8/9	8/16
Attending								

SESSION OPTIONS	8 WEEKS	7 WEEKS	6 WEEKS	5 WEEKS	4 WEEKS
<b>DAY CAMP or KinderCamp</b>	<input type="checkbox"/> \$4480	<input type="checkbox"/> \$4305	<input type="checkbox"/> \$4020	<input type="checkbox"/> \$3625	<input type="checkbox"/> \$3150
Age 3 - 6 <sup>th</sup> Grade 5 Days a week – 9AM-4PM Lunch and transportation provided	Regularly \$5190	Regularly \$4480	Regularly \$4530	Regularly \$4095	Regularly \$3500
<b>Options for 3 and 4 year olds</b>					
<input type="checkbox"/> 3 Full Days Circle Days - M T W Th F	<input type="checkbox"/> \$3535 Regularly \$4065	<input type="checkbox"/> \$3375 Regularly \$3845	<input type="checkbox"/> \$3130 Regularly \$3545	<input type="checkbox"/> \$2810 Regularly \$3150	<input type="checkbox"/> \$2410 Regularly \$2695
<input type="checkbox"/> 5 Half Days (AM TRANS ONLY)					
<b>EXTENDED HOURS</b>					
Before Care 7AM-9AM	<input type="checkbox"/> \$320	<input type="checkbox"/> \$280	<input type="checkbox"/> \$240	<input type="checkbox"/> \$200	<input type="checkbox"/> \$160
After Care 4PM-6PM	<input type="checkbox"/> \$320	<input type="checkbox"/> \$280	<input type="checkbox"/> \$240	<input type="checkbox"/> \$200	<input type="checkbox"/> \$160
<b>DISCOUNTS</b>					
SIBLING DISCOUNT (Save on all siblings after the 1 <sup>st</sup> camper)	8 Weeks <input type="checkbox"/> -\$200		6 or 7 Weeks <input type="checkbox"/> -\$150		4 or 5 Weeks <input type="checkbox"/> -\$100
TRANSPORTATION (Parent must provide transportation to and from camp.)	8 Weeks <input type="checkbox"/> -\$300		6 or 7 Weeks <input type="checkbox"/> -\$245		4 or 5 Weeks <input type="checkbox"/> -\$175

- Camp fees include lunch, transportation, camp shirt, camp photo, snack and beverage daily, and insurance.
- You must be registered by June 1 to guarantee transportation availability and bunk requests
- **Deposit of \$500 per child required with registration.** Balance due April 1, 2010. Campers with outstanding balances prior to starting camp will not be permitted to attend.
- **Deposits are refundable until March 1, 2010 except for a \$50 processing fee.** Checks returned for insufficient funds will be charged a processing fee. Other refunds will be at the discretion of the Director, payable at the end of the camp season.
- **Deposit checks should be made payable to Hi-Hills Camp at Gill St. Bernard's. Credit Cards accepted: Visa, MasterCard, and American Express.**
- There is no camp on Monday, July 5th, 2010.
- It is understood that there are no refunds due to illness, absences, or withdrawals.
- **Campers will not be permitted to attend camp without a current health history form.**
- Parents hereby grant permission to use photographs taken at Hi-Hills at Gill St. Bernard's for promotion or display. Consent is granted for transportation to and from any camp activity or program. The camp is not responsible for lost personal property.
- Camp reserves the right to dismiss or suspend campers due to behavior that is detrimental to the well-being of camp and or campers.

**By signing below, parent/guardian agrees to the terms listed above.**

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Amount Enclosed: \_\_\_\_\_ Check # \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Card Type: \_\_\_\_\_

**WE HAVE THE FOLLOWING FRIENDS WHO MIGHT BE INTERESTED IN HI-HILLS. PLEASE SEND INFORMATION TO:**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_