



NORTH BRANCH REFORMED CHURCH PRESCHOOL

203 Route 28, Bridgewater, NJ 08807 (908) 725-2326 www.nbrcpreschool.com preschool@nbrc.com

CAMP NORTH BRANCH REGISTRATION FORM

PLEASE PRINT CLEARLY AND COMPLETE BOTH SIDES OF REGISTRATION FORM

CHILD'S NAME _____ BOY GIRL DATE OF APPLICATION _____

(circle one)

MAILING ADDRESS _____

Street

Town

Zip Code

TELEPHONE () _____ DATE OF BIRTH _____

EMAIL ADDRESS _____

PARENTS OR GUARDIANS:

MOTHER'S NAME _____ CELLULAR PHONE _____

PLACE OF EMPLOYMENT _____ BUSINESS PHONE _____

EMPLOYER'S ADDRESS _____

FATHER'S NAME _____ CELLULAR PHONE _____

PLACE OF EMPLOYMENT _____ BUSINESS PHONE _____

EMPLOYER'S ADDRESS _____

NAMES AND BIRTH DATES OF OTHER CHILDREN IN FAMILY _____

ANY SPECIAL CIRCUMSTANCES OF WHICH OUR SCHOOL SHOULD BE AWARE: (Single Parent Home, Adoption, Grandparents Living in Home, etc.) _____

PLEASE NOTE ANY SERIOUS ILLNESSES, INJURIES, SURGERY, ALLERGIES, ETC, _____

ARE YOU A MEMBER OF NORTH BRANCH REFORMED CHURCH? (circle one) yes no

PRESCHOOL/DAYCARE EXPERIENCE (NAME OF PRESCHOOL/DAYCARE, WHEN ATTENDED): _____

PHYSICIAN'S NAME _____ TELEPHONE _____

PHYSICIAN'S ADDRESS _____

EMERGENCY INFORMATION: Please list the names and addresses of **TWO PEOPLE IN THE LOCAL AREA** who will accept responsibility for the care of your child if you cannot be reached.

1. NAME _____ Home Phone _____

Cell Phone _____

ADDRESS _____

2. NAME _____ Home Phone _____

Cell Phone _____

ADDRESS _____

I hereby authorize the Preschool's staff to secure emergency medical treatment for my child if their parents or guardians cannot be reached.

SIGNATURE _____ DATE _____

In the event of an emergency, I authorize the Preschool staff to walk my child to a safe location, either on or off church property.

SIGNATURE _____ DATE _____

YOUR CHILD MUST BE TOILET TRAINED TO ATTEND CAMP NORTH BRANCH.

Is your child presently toilet trained? (Circle one) Yes No

WEEK	DATES	COST	Weeks Your Child Will Attend
1	Animal Planet June 15th-June 18th	\$140	
2	God Bless America June 22nd- June 25th	\$140	
3	Beach Party July 6th - July 9th	\$140	
4	A Bug's Life July 13th - July 16th	\$140	
5	Olympic All Stars July 20th - July 23rd	\$140	
		TOTAL DUE:	

****If there is any additional information you think might be of help to us in understanding your child, please add it here.****

Registration is complete upon receipt of completed registration form and nonrefundable camp payment.

** All camp payments are nonrefundable and may only be applied to the 2020 camp weeks. ***

SIGNATURE _____ DATE _____

OFFICE USE ONLY

Camp Payment #1: Date: _____ Check #: _____ Amount: _____
 Camp Payment #2: Date: _____ Check #: _____ Amount: _____
 Camp Payment #3: Date: _____ Check #: _____ Amount: _____
 Health Form: YES
 Immunization Record: YES

