



After-Care Activity Selection

Camper: _____ (M)ale or (F)emale: _____

Student ID Number: _____

Parent/Guardian #1 Name: _____

Day Phone #: _____ Cell Phone #: _____

Parent/Guardian #2 Name: _____

Day Phone #: _____ Cell Phone #: _____

Alternate person(s) allowed to pick up child: _____

Please select and number (1, 2, 3) **three** favorite activities your child would most enjoy participating in **each** week he/she is registered for After-Camp Care. We will make every effort to schedule your child according to his/her first choice, but limited space is available in some activities. **NOTE: Swimming will be assigned on a rotational basis throughout the camp session to ensure that every child who is interested in this activity will have an equal opportunity to participate. Please select carefully since we will be unable to accommodate schedule change requests.**

Session 1

Session 2

Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Activity Selection
June 22-26	Jun 29- July 2*	July 6-10	July 13-17	July 20-24	July 27-31	Aug 3-7	Aug 10-14	
								Swim from 4-5:15pm, then go the (PE building) gym for outdoor activities until departure. NOTE: No early dismissal from the pool is permitted. Based on the popularity of this selection, if necessary spaces will be filled on a rotational basis throughout the four-week camp session. (Six-year-olds not eligible for this selection)
								Outdoor sports and games activities until departure.
								Movie selection changes daily, (CM building). NOTE: No early dismissal, please. Campers should remain until 5:45 p.m.
								Library summer reading fun for every grade.
								Board Games challenges until 5:30 p.m.
								Computer Games individual and group challenges until 5:30 p.m. (Six-year-olds not eligible for this selection)

*No class July 3

This form must be returned with your camp registration