



Christopher Academy

510 Hillcrest Avenue
Westfield, New Jersey 07090-1365
(908) 233-7447
Fax (908) 322-4616

SUMMER CAMP REGISTRATION FORM 2024

Half-Day Camp - 9:00 AM – 1:00 PM

Full-Day Camp - 9:00 AM – 3:00 PM

Child's Name _____

Address _____ City/State _____ Zip _____

Phone _____ Date of Birth _____ Age _____

Guardian #1 Name _____ Phone _____

Guardian #1 Email _____

Guardian #2 Name _____ Phone _____

Guardian #2 Email _____

Pediatrician (Name & Phone) _____

Allergies _____

Special Health Needs _____

Emergency Contact _____ Phone _____

Address _____ City/State _____

Emergency Contact _____ Phone _____

Address _____ City/State _____

Please include Registration Fee (below in parentheses) with this application. This fee is refundable up to April 15, 2024. The Registration Fee is applied toward the final tuition. Full payment is due by May 15, 2024. No refunds will be given for absences, or for any other reason, during camp sessions. Registration fee amounts indicated below in parentheses.

PLEASE INDICATE BELOW YOUR WEEK AND SESSION CHOICES:

Week of: June 24 _____ *July 1 _____ July 8 _____ July 15 _____ July 22 _____ July 29 _____

CAMP FEES HALF DAY

___ 6 weeks	\$2780 (\$650)
___ 5 weeks	\$2325 (\$550)
___ 4 weeks	\$1860 (\$450)
___ 3 weeks	\$1395 (\$350)
___ 2 weeks	\$ 930 (\$250)

CAMP FEES FULL DAY

___ 6 weeks	\$3510 (\$775)
___ 5 weeks	\$2925 (\$650)
___ 4 weeks	\$2340 (\$525)
___ 3 weeks	\$1755 (\$400)
___ 2 weeks	\$1170 (\$300)

**Please note that if attending the week of July 1, please deduct \$186 for half day camp and \$234 for full day camp (for the 2-day holiday 7/4-7/5) off your final tuition balance due.*

Please note that enrollment is contingent on a TWO-WEEK MINIMUM. Additional weeks may be added.

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Please forward your check and registration form to:
Christopher Academy, 510 Hillcrest Avenue, New Jersey 07090
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