

# 2019 DAY CAMP APPLICATION – COLLEGE of SAINT ELIZABETH

## Weekly Camp Rates

Enroll by 1/31/19	Enroll after 1/31/19
<b>\$345</b>	<b>\$405</b>

**\$75 Deposit per camper per week is required to enroll for camp.**

**Deposits are applied to the tuition and balances are due by 5/31.**

Camper Name: \_\_\_\_\_ Sex (Circle): M / F

Date of Birth: \_\_\_\_\_ Grade in Sept. 2019: \_\_\_\_\_ School: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Shirt Size (Circle): YS YM YL AS AM AL Primary Phone: \_\_\_\_\_

Parent Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

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

Parent Name: \_\_\_\_\_ Cell #: \_\_\_\_\_

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

How did you hear about Future Stars?     Referral     Internet     Mailing     Other

Enclosed is \$75 deposit/week                       Enclosed is Full Payment

Please charge my:     MasterCard     Visa     AMEX     DISC    Amount: \_\_\_\_\_

Account #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Name on card: \_\_\_\_\_

Make Check Payable to: Future Stars  
 Mail to: Future Stars  
 PO Box 150  
 Doylestown, PA 18901

I hereby authorize the staff of Future Stars Camps to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release the Camp from any and all liability for any injuries or illness incurred while at Camp. I have no knowledge of any physical impairment that would be affected by the above-named Camper's participation in the Camp program, as outlined in the brochure. I also understand the Camp retains the right to use for publicity and advertising purposes, photographs and videotapes of Campers taken at Camp.

Signature: \_\_\_\_\_

	Traditional 4-13 yrs	All Sports 7-13 yrs	Tennis 7-13 yrs	Fine Arts 7-13 yrs	Robotics 9-13 yrs	Drone Camp 9-13 yrs	CSI 9-13 yrs	Robotics Jr 6-8 yrs
June 24 – 28	<input type="checkbox"/>	<input type="checkbox"/>						
July 1 – 5*	<input type="checkbox"/>	<input type="checkbox"/>						
July 8 – 12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>			
July 15 – 19	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>		
July 22 – 26	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	
July 29 – August 2	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>
August 5 – 9	<input type="checkbox"/>	<input type="checkbox"/>						

\*July 1-5 will be pro-rated for camp closure Thursday July 4

- Please check if you are using Tot Time from 9am-1pm (4 & 5 year old campers only)
- Please check if you are using our 3-day program