

2018 Camp Apogee Registration

Hilltop CDS & Lake Mohawk Pool

Mail registration form along with your check made out to Camp Apogee.
Camp Apogee 32 Lafayette Rd., Sparta, NJ 07871

If you have questions please call Laura McGee at 973 729-5485 or campapogee@aol.com

Parent/Guardian _____

Address _____ City _____ State _____ Zip _____

E-mail _____

Home Phone _____ Primary Cell # _____

Camper's Name	Gender	Date of Birth	Grade Entering	School

_____ Entire Summer Full Day Camp @ \$2,520 (INCLUDES a Weekend Membership for the Family at the Pool)

_____ Entire Summer ½ Day Camp @ \$2,100

_____ 2-week ½ Day Sessions (\$525 per 2-weeks) Weeks must be consecutive

_____ 2-week Full Sessions (\$735 per 2-weeks) Weeks must be consecutive

_____ Session #1: Full Day @ \$1,260 (June 25 -July 20)

_____ Session #1: ½ Day @ \$1,050 (June 25 -July 20)

_____ Session #2: Full Day @\$1,260 (July 23-Aug. 17)

_____ Session #2: ½ Day @ \$1,050 (July 23-Aug. 17)

_____ Before Care 7:00 am – 8:30 am @ \$25 per week

_____ After Care 4:30 pm – 6:00 pm @ \$25 per week

2018 Registration

Circle Each Week In Camp

Weeks Key: 1: 6/25, 2: 7/2, 3: 7/9, 4: 7/16, 5: 7/23, 6: 7/30, 7: 8/6. 8: 8/13

Full Day 8:30 am – 4:30 pm

Half-Day 8:30 am – Noon

Camp tuition covers regular camp program and activities, morning and afternoon (full-day) snack and drink, lunch (full-day), insurance and bus transportation from Hilltop to Camp Apogee.

3 Methods of Payment: (3% service charge applies to Credit Card or Online payments)

1. Check - Mail registration form along with your check made out to Camp Apogee prior to: Camp Apogee 32 Lafayette Rd., Sparta, NJ 07871

2. Credit Card # _____, Exp. Date _____ Code _____

Name as it appears on the card _____

3. Online at www.CampApogee.com

Camp Apogee Enrollment Agreement

I understand camp will be closed for the Independence Day holiday on Wednesday, July 4, 2018

I hereby give my consent to Camp Apogee and any agent acting on its behalf to secure and provide any medical attention that might be necessary and urgent during a time when I cannot be contacted by telephone. I further agree to accept responsibility for any medical expenses incurred on behalf of the above-named child under the conditions described above.

I hereby give my permission to Camp Apogee to use photographs and/or videos taken of the above-named child at camp for promotional use.

By signing below all applicants and attendees agree to abide by the Rules and Regulations of Camp Apogee, and or its assignee and is understood that that are no refunds due to withdrawals or emergency closings.

I understand and agree that the Camp Director shall retain the right to exclude any child from participating in any activity that, in his/her reasonable judgement, the child is not yet ready to participate in safely or where the child's participation at the time in question may interfere with the health, safety or well-being of others.

I understand that Camp Apogee is not responsible for any of my child's belongings that are lost, stolen or damaged.

Camp Apogee does not discriminate based on race, religion, age or lifestyle.

Parent's or Guardian's Signature

Date