

**2010**  
**HIGHLAND PARK**



**INFORMATION**  
**BOOKLET**

**Day Camp - For Students Entering  
Grades K-6**

**Sports Camp - For Students Entering  
Grades 3-9**

# Highland Park Summer Camp Options



## Camp Discovery - Grades K-6

**JULY 5 - AUGUST 20, 2010**

**9:00 AM to 3:00 PM**

- \*Weekly Pool Visits
- \*Arts and Crafts
- \*Music

- \*Day Trips
- \*Sports
- \*Electives

- \*Cooking
- \* Special events
- \* and much, much more!



## Junior Owls Sports Camp - Grades 3-9

**JULY 5 - AUGUST 12, 2010**

**Full Day (6<sup>th</sup> - 9<sup>th</sup> graders only) 9am-3pm**

**Half Day 9am-12pm (6<sup>th</sup>-9<sup>th</sup> graders only) or  
1pm-4pm (3<sup>rd</sup>-5<sup>th</sup> graders and 6<sup>th</sup>-9<sup>th</sup> graders)**

- \* July 12-15: Basketball (Highland Park High School)
- \* July 19- 22: Baseball / Softball (Donaldson Park)
- \* July 26- 29: Wrestling or Tennis (Highland Park Middle School / Johnson Park)
- \* August 2-5: Soccer (Highland Park High School)
- \* August 9- 12: Football (Highland Park High School)

## 2010 Summer Camp Fees

### **Day Camp - For Students Attending Camp from 9am-3pm (5 days per week)**

	1 Week	2 Weeks	3 Weeks	4 Weeks	5 Weeks	6 Weeks	7 Weeks	Before Care (8am- 9am)	After Care (3pm- 6pm)
Regular Tuition	\$200	\$400	\$600	\$800	\$1,000	\$1,200	\$1,400	\$15/wk	\$50/wk
Reduced- Lunch Tuition - HP	\$55	\$110	\$165	\$220	\$275	\$330	\$385	\$8/wk	\$15/wk
Non-Resident	\$230	\$460	\$690	\$920	\$1,150	\$1,380	\$1,610	17.25/wk	\$57.50/wk

### **Sports Camp - For Students Attending Junior Owls Sports Camp (4 days per week)**

	1 Week	2 Weeks	3 Weeks	4 Weeks	5 Weeks	Before Care (8am- 9am)	After Care (3pm- 6pm)
<b>Full Day (9am-3pm)</b>							
Regular Tuition	\$160	\$320	\$480	\$640	\$800	\$12/wk	\$40/wk
Reduced- Lunch Tuition - HP	\$50	\$100	\$150	\$200	\$250	\$6.40/wk	\$12/wk
Non-Resident	\$184	\$368	\$552	\$736	\$920	\$13.80/wk	\$46/wk
<b>Half Day (9am-12pm) or (1pm-4pm)</b>							
Regular Tuition	\$85	\$170	\$255	\$340	\$425		
Reduced- Lunch Tuition - HP	\$30	\$60	\$90	\$120	\$150		
Non-Resident	\$97.75	\$195.50	\$293.25	\$391	\$488.75		

Welcome - we are looking forward to an exciting summer camp program for your child. Please complete the following forms and return them with payment to us before June 25<sup>th</sup> (no refunds). After June 25<sup>th</sup>, there will be a \$15.00 late fee to register. Once registered for one or more weeks, you may add extra weeks, without penalty, if there are openings.

Senior / Youth Center  
220 South Sixth Avenue  
Highland Park, NJ 08904  
Attn: Summer Camp

#### Locations

All Programs will be based at the Highland Park Middle School / High School Campus.

- 1) Day Camp will be based in the Middle School Cafeteria
  - Morning drop-off and afternoon pick-up: enter from North 4<sup>th</sup> Ave. onto Wayne Street and park in the lot outside the Middle School.
  
- 2) Sports Camps will be based:
  - Basketball, Wrestling, Soccer, and Football - drop off and pick up at the High School Gym
  - Baseball / Softball - drop off and pick up at Donaldson Park
  - Tennis - drop off and pick up at Johnson Park
  
- 3) Before Care and After Care will be based in the Middle School Gym

- Before Care - only children *enrolled* in before care may attend and parent / guardian must sign the child in beginning at 8am. No staff will be available before 8am.
- After Care - only children *enrolled* in the after care program may stay. Parent / Guardian must sign the child out no later than 6pm.

\* On rainy days, all sports activities will be at the High School Gym.

\*\* Transportation between locations is not provided. Parents are responsible to drop off and pick up their children at all locations.

### What to bring:

- 1) Bag lunch everyday
- 2) Snack for children enrolled in aftercare
- 3) Hat
- 4) Sunscreen (sunscreen should be applied prior to arrival)
- 5) Sneakers (no flip-flops please)
- 6) Day Campers - On pool days, send a towel and have child wear a bathing suit under his / her clothes.
- 7) Always send a change of clothes with the child in his / her backpack
- 8) Sports Camp - please wear clothing suitable to the sport - sneakers / cleats - bring any sports equipment necessary: baseball / softball mitt, tennis racket.

### Day Trips

- 1) Children must wear camp t-shirt
- 2) Send in disposable lunch with No Glass!

# REGISTRATION FORM~ Highland Park Summer Camps 2010

## Camp Registration

Please complete this registration form, enclose your check or money order payable to "Highland Park Summer Camp", and mail to:

Highland Park Senior / Youth Center  
 220 South 6<sup>th</sup> Avenue  
 Highland Park, NJ 08904  
 ATTN: Summer Camp

If you have any questions, visit [hpboro.com](http://hpboro.com) or call: (732)819-0052

**\*\*\*\*\*Please check off the week/weeks your child will attend camp.\*\*\*\*\***

	July 5-9	July 12-15/16	July 19-22/23	July 26-29/30	August 2-5/6	August 9-12/13	August 16-20
Camp Discovery (specify if day camp only or day camp / sports camp combo)							
Junior Owls (specify full or half day and either morning or afternoon session)							

Please check if your child will be enrolled in Before/After Care:  Before Care 8-9AM  
 After Care 3-6PM

**\*\*FINAL PAYMENTS ARE DUE upon Registration.**

**Registration Deadline - JUNE 25<sup>th</sup>. (There will be a \$15.00 late fee after this date). \*\***

# Summer Camp Registration Form

One Form per Participant - Check or Money Order Only

Please make checks payable to "The Borough of Highland Park" - No Refunds!

Name of Participant \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Name of Parent (if participant is under 18 years old) \_\_\_\_\_

Applicant Age \_\_\_\_\_ Grade (as of Sept/2010) \_\_\_\_\_ Name of School \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

**\*\*\*All communications will be sent via email, so please print clearly.**

## Medical Information

Please list Medical Conditions/ Special Needs/Allergies/ Medications

\_\_\_\_ My Child needs to carry an epi-pen or inhaler. Special arrangements can be made for young children.

### Medical Treatment in an emergency:

I, the Parent or Guardian of \_\_\_\_\_, give permission for my child to receive emergency medical treatment in my absence.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Which hospital do you prefer your child to be taken to (check one):

St Peter's Medical Center \_\_\_\_

RWJ Medical Center \_\_\_\_

JFK Medical Center \_\_\_\_

Every effort will be made to transport your child to your hospital of preference. However, we cannot guarantee that your child will be transported to the hospital of choice.

Family Doctor Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Insurance Carrier: \_\_\_\_\_ ID#: \_\_\_\_\_ Group #: \_\_\_\_\_

## Emergency Contact Information

Emergency Contact Name \_\_\_\_\_  
Phone Number \_\_\_\_\_ Relationship \_\_\_\_\_

I agree to abide by the conditions herein and agree to hold harmless, waive, and release any and all claims for damages against the Borough of Highland Park, its agents and employees, and other such individuals who may be involved in the planning and implementation of this program or event.

I recognize that participation in sports and other activities may occasionally lead to injury. Most common injuries that occur are abrasions, bruises, sprains and strains. Less common injuries, but perhaps more serious, may occur. I hereby authorize emergency medical care for my children) or myself. If, in the judgment of the staff, treatment is required for injury or illness, I hereby authorize the administering of anesthetics and recourse to other procedures deemed necessary by attending physician. I recognize that I am financially responsible for any expenses for medical care or transportation incurred. I further understand that photographs may be taken, and will be used for promotional purposes only.

Please Initial indicating that you have read this statement. \_\_\_\_\_

Department of Community Services / Office of Recreation  
220 South Sixth Avenue  
Highland Park, NJ 08904  
732-819-0052

## Camp Release forms 2010

Name of Child \_\_\_\_\_

Please list yourself and 2 other adults who we can contact in an emergency. Please provide daytime phone numbers:

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Emergency Phone Number

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Relationship)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Relationship)

\_\_\_\_\_  
(Phone)

List all escorts (can be children over 14 years of age) other than yourself, who have permission to pick up your child from camp:

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Relationship)

\_\_\_\_\_  
(Phone)

\_\_\_\_\_  
(Name)

\_\_\_\_\_  
(Relationship)

\_\_\_\_\_  
(Phone)

I understand that by signing this permission slip I am agreeing that my child will only be released to the individuals whom I have identified above, and these individuals may be required to show proof of identification. I hereby release the Borough of Highland Park and the Staff of the Highland Park Summer Camps from any and all claims that may arise relating to my child leaving camp with the above-designated escort.

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Date

Permission to walk home unaccompanied – **Only sign if you give consent!**

I, the Parent or Guardian of \_\_\_\_\_ give my consent to allow my child to walk home from camp without an accompanying adult. I understand that I am responsible for my child when camp has concluded, and I hereby release the Borough of Highland Park and the Staff of the Highland Park Summer Camps, from any and all claims that may arise relating to my child walking home from camp.

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Date

**Photo Release:**

I, the Parent of Guardian of \_\_\_\_\_ give / do not give (circle one) consent for photos to be taken and used for publicity purposes.

\_\_\_\_\_  
Parent / Guardian

\_\_\_\_\_  
Date

**Swimming Release:**

\_\_\_\_ I **allow** my child to swim with adult supervision.

\_\_\_\_ I **do not allow** my child to swim with adult supervision.

**Fee Calculation Chart**

Camp (Day Camp or Sports Camp) \_\_\_\_\_

Weekly Fee \_\_\_\_\_

# Weeks attending \_\_\_\_\_

**Total** \_\_\_\_\_

Camp (Day Camp or Sports Camp) \_\_\_\_\_

Weekly Fee \_\_\_\_\_

# Weeks attending \_\_\_\_\_

**Total** \_\_\_\_\_

Before Care Fee \_\_\_\_\_

# Weeks attending \_\_\_\_\_

**Total** \_\_\_\_\_

After Care Fee \_\_\_\_\_

# Weeks attending \_\_\_\_\_

**Total** \_\_\_\_\_

**Grand Total** \$ \_\_\_\_\_

\*\*\* Reduced lunch participants, please include a copy of your letter from the school.

\*\*\* Please make check payable to **“The Borough of Highland Park”**