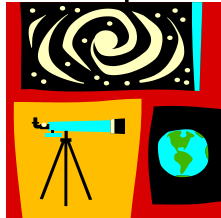


Mini-Camp Program

Ivy League Day Camp

**December 26th, 27th, 28th & 29th
9:30AM-3:00PM**



**Pre-School -Kindergarten
1st-3rd Grades
4th-6th Grades**



**5 1/2 Hour Program
Safe-Fun-Active Play**

**Basketball, Soccer, Races
Bounce House
Arts & Crafts
GaGa**



**Cookie Decorating
Music & Motion**



**Pizza and beverage will be
served for lunch with snacks
during the day**

**Two Days-\$140 3 Days-\$200 4 Days-\$260
Please RSVP by December 19th
2 DAY MINIMUM REQUIRED
BEFORE CARE & AFTER CARE AVAILABLE**



140 Gordon's Corner Road
Manalapan, New Jersey
732-446-7035
www.ivyleaguedaycamp.com



Name _____ Male ___ Female ___ Age as of Dec'17 Yrs. ___ Mo. ___

Home Address _____

Mother's Name _____ Home Phone _____
Cell _____

Father's Name _____ Home Phone _____
Cell _____

E-Mail Address _____ @ _____
(PLEASE PRINT CLEARLY)

MEDICAL INFORMATION: The Directors will exercise every reasonable precaution consistent with safety, health and care. Furthermore, in the event that I, or my family physician, cannot be contacted in an emergency, I hereby grant permission to Centra-State Hospital in Freehold, to provide a physician and to give emergency treatment to my child.

Doctor's Name _____ Phone _____

Known Allergies _____

EMERGENCY INFORMATION: Please list two people, other than parent, who can be contacted in case of an emergency and would be available in case of weather related school closing.

Name _____ Relationship _____

Day phone _____

Name _____ Relationship _____

Day phone _____

Circle days attending– Tuesday 12/26 Wednesday 12/27 Thursday 12/28 Friday 12/29

\$140 for 2 days

\$200 for 3 days

\$260 for 4 days

2 DAY MINIMUM REQUIRED

Before and After Care: Before Care -7:30AM-9:30AM After Care - 3:30PM-6:30PM
(Please Circle) \$10 per day \$15 per day

Both Before & After Care \$20 per day

Please make check payable to Ivy League Day Camp

Parent signature _____ Date _____