



SESAME/ROCKWOOD CAMPS

founded 1953

Camp Office: P. O. Box 385 • Blue Bell, PA 19422

Voice (610) 275-CAMP • Fax (610) 279-4463

www.srdaycamps.com



2018 CAMPER ENROLLMENT APPLICATION

CAMPER INFORMATION

For additional campers in same family, please attach second form.

First Name _____ Last Name _____

Date of Birth _____ Gender: Male Female

Grade (Sept. '17) _____ School (Sept. '17) _____

Grade (Sept. '18) _____ School (Sept. '18) _____

Group (bunk) Request ... list in order of preference. (two names only)

(1) _____ (2) _____

SESAME/ROCKWOOD DAY CAMP

8 weeks (June 25-August 17) Holiday on Wednesday, July 4th

1ST 4 weeks (June 25-July 20)

1ST 6 weeks (June 25-August 3)

2ND 4 weeks (July 23-August 17)

2ND 6 weeks (July 9-August 17)

Or, select weeks individually (which must be 4 weeks or more if non-consecutive)

1 (June 25-June 29)

3 (July 9-13)

5 (July 23-27)

7 (August 6-10)

2 (July 2-July 6; holiday 7/4)

4 (July 16-20)

6 (July 30-August 3)

8 (August 13-17)

Additional Programs for 3, 4 & 5 year olds (Genie & Aladdin Groups)

5 mini days

4 full days

3 full days

3 full & 2 mini days

4 mini days

Please mark days attending & indicate which are full / which are mini

M _____ Tu _____ W _____ Th _____ F _____

First Name _____ Last Name _____

Date of Birth _____ Gender: Male Female

Grade (Sept. '17) _____ School (Sept. '17) _____

Grade (Sept. '18) _____ School (Sept. '18) _____

Group (bunk) Request ... list in order of preference. (two names only)

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M _____ Tu _____ W _____ Th _____ F _____

ROCKWOOD ADVENTURES TEEN TRAVEL

Camp & Travel Combo is a minimum of three weeks of camp and one session of Travel.

SESSION A

(5 day)

Monday, June 25 - Friday, June 29

SESSION B

(10 day)

Tuesday, July 3 - Thursday, July 12

SESSION C

(10 day)

Monday, July 16 - Wednesday, July 25

SESSION D

(5 day)

Monday, July 30 - Friday, August 3

ROCKWOOD ADVENTURES TEEN TRAVEL

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SESSION A

(5 day)

Monday, June 25 - Friday, June 29

SESSION B

(10 day)

Tuesday, July 3 - Thursday, July 12

SESSION C

(10 day)

Monday, July 16 - Wednesday, July 25

SESSION D

(5 day)

Monday, July 30 - Friday, August 3

FAMILY INFORMATION

Camper's

Home Address: _____ City _____ State _____ Zip _____ Home Phone _____

Mother/Guardian

Home Address

Full Name _____ (if different) _____

Cell

Bus.

Home

Phone _____ Phone _____ Phone _____ E-mail _____

Father/Guardian

Home Address

Full Name _____ (if different) _____

Cell

Bus.

Home

Phone _____ Phone _____ Phone _____ E-mail _____

Please check one: Married Divorced Re-Married Other _____

Please enroll my child(ren) for the 2018 camp season. I have read and agree to the conditions of enrollment and the refund/cancellation policies set forth on the reverse side.

My deposit check is enclosed. Minimum: \$300 per child.

Camp is authorized to charge my VISA/MasterCard/AMEX account only for the initial deposit of \$300 per child.

This is not an authorization for a Monthly Charge. I will submit a Monthly Authorization Form at a later date if I wish to pay monthly by credit card.

security code _____

exp. date _____ / _____

Credit Card Number _____

Signature of Parent or Guardian _____

Date _____

Transportation - Check Whatever is Applicable

Note: Mini Day 1:00 PM Camp Trans for 3, 4, & 5 year-olds is not available.

DAY CAMP

Camp providing curbside-to-curbside transport AM & PM.

Parent providing transport both AM & PM.

Parent providing AM transport. Camp providing PM transport.

Camp providing AM transport. Parent providing PM transport.

TEEN TRAVEL ONLY

Central Pickup for Main Line, Bucks County & Huntingdon Valley

Combo Program (with camp) which includes curbside to curbside

Parent providing AM & PM transport. No charge for morning/afternoon care.



It is not our wish to invade your family's privacy. However, another camp family may request your phone number / email / address for a play date, child's birthday party, or as a camp reference.

Check here if you would **not** want us to provide this information.