



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



2019 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. '18) _____ School (Sept. '18) _____
 Grade (Sept. '19) _____ School (Sept. '19) _____
 Group (bunk) Request ... list in order of preference. (two names only)
 (1) _____ (2) _____

SESAME/ROCKWOOD DAY CAMPS
 8 weeks (June 24-August 16) Holiday on Thursday, July 4th
 1ST 4 weeks (June 24-July 19) 1ST 6 weeks (June 24-August 2)
 2ND 4 weeks (July 22-August 16) 2ND 6 weeks (July 8-August 16)

Or, select weeks individually (which must be 4 weeks or more if non-consecutive)
 1 (June 24-June 28) 3 (July 8-12) 5 (July 22-26) 7 (August 5-9)
 2 (July 1-July 5; holiday 7/4) 4 (July 15-19) 6 (July 29-August 2) 8 (August 12-16)

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. '18) _____ School (Sept. '18) _____
 Grade (Sept. '19) _____ School (Sept. '19) _____
 Group (bunk) Request ... list in order of preference. (two names only)
 (1) _____ (2) _____

SESAME/ROCKWOOD DAY CAMPS
 8 weeks (June 24-August 16) Holiday on Thursday, July 4th
 1ST 4 weeks (June 24-July 19) 1ST 6 weeks (June 24-August 2)
 2ND 4 weeks (July 22-August 16) 2ND 6 weeks (July 8-August 16)

Or, select weeks individually (which must be 4 weeks or more if non-consecutive)
 1 (June 24-June 28) 3 (July 8-12) 5 (July 22-26) 7 (August 5-9)
 2 (July 1-July 5; holiday 7/4) 4 (July 15-19) 6 (July 29-August 2) 8 (August 12-16)

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 _____

ROCKWOOD ADVENTURES TEEN TRAVEL

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

- SESSION A** (5 days) Monday, June 24 - Friday, June 29
Connecticut & New England
- SESSION B** (10 day) Monday, July 8 - Wednesday, July 17
Heading South (VA; GA; NC; SC)
- SESSION C** (10 day) Monday, July 22 - Wednesday, July 31
Boston Bound to Maine Adventure

ROCKWOOD ADVENTURES TEEN TRAVEL

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

- SESSION A** (5 days) Monday, June 24 - Friday, June 29
Connecticut & New England
- SESSION B** (10 day) Monday, July 8 - Wednesday, July 17
Heading South (VA; GA; NC; SC)
- SESSION C** (10 day) Monday, July 22 - Wednesday, July 31
Boston Bound to Maine Adventure

FAMILY INFORMATION

Camper's Home Address _____ City _____ State _____ Zip _____ Home Phone _____

Mother/Guardian Full Name _____ Home Address (if different) _____
 Cell Phone _____ Bus. Phone _____ Home Phone _____ E-mail _____

Father/Guardian Full Name _____ Home Address (if different) _____
 Cell Phone _____ Bus. Phone _____ Home Phone _____ E-mail _____

Please check one: Married Divorced Re-Married Other _____

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.

Please enroll my child(ren) for the 2019 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 to pay monthly.**



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.

security code _____
 exp. date _____ / _____
 Credit Card Number _____
 Signature of Parent or Guardian _____ Date _____
Custody/Divorce/Separation - see other side. Both parties must sign.