



REGISTRATION FORM

July 8-12, 15-19

9:00 am – 12:00 pm

Children between the ages of 7 and 17 may participate

Complete this form and return it with payment to Saint Aloysius Musical Theater Camp / 935 Bennetts Mills Road / Jackson, NJ 08527 by June 30. There will be a \$25 late charge for registrations received after that date. Forms can also be dropped off in the rectory office during office hours.

Child's Name (Last) _____ (First) _____

Age _____ Date of Birth _____ Grade _____ As of Fall 2019 _____

Address _____ City/St _____ Zip _____

Parent's Name (Last) _____ (First) _____

Home Phone # _____ E-mail _____

Parent's Cell # _____ Parent's Work # _____

Does this child have any medical condition(s) that we should be aware of (allergies, medications, etc?)

If so please explain. _____

Dismissal & Emergency Contact Information (To serve your child in case of ACCIDENT OR SUDDEN ILLNESS)

1. Name _____ Phone # _____

2. Name _____ Phone # _____

T-shirt size: (Please circle one) CHILD XS SM MED LRG ADULT SM MED LRG XL XXL

Siblings who will also be attending _____

Medical conditions / allergies of siblings _____

PLEASE ENCLOSE PAYMENT IN THE FORM OF A CHECK PAYABLE TO "SAINT ALOYSIUS CHURCH"

FEES: The full cost of attendance for two weeks of camp is \$200 which includes a t-shirt and DVD.

The cost of attendance for each additional sibling is \$175 each.

The cost of attendance for less than the full two weeks is \$25 per day (\$20 for additional siblings)