

# Muhlenberg Summer Day Camp

June 14 through August 26

Camp start date may be subject to change.

For Youth ages 6 through 12

Open Monday through Friday from 9:00 AM to 3:30 PM

\$25 registration fee per child for summer 2021

Fee covers camp T-shirt and supplies

\$125 per week

Fee includes all activities

All campers should bring a bagged lunch

Extended Care is Available

Open Monday through Friday from

6:00 AM to 9:00 AM and 3:30 PM to 6:00 PM

\$60 per week additional fee

Register for camp by filling out the attached registration form. Keep this side of the form for your information.

**\*To secure your spot please send the registration fee along with the form as well as the cost of the first week.** If you have multiple children, there is a 10% discount in price for your second and subsequent children, off the cost of camp and before and after care fee.

Make checks payable to *Good Shepherd Lutheran Church*.

Send registration form and check to...

**Muhlenberg Summer Day Camp**

**Good Shepherd Lutheran Church; 4201 Stoudt's Ferry Bridge Road; Reading, PA 19605**

**For more information, contact Rebecca Watson at 610-926-4201 ext. 207**

## Week Dates:

**Week #1**- June 14-18

**Week #2**- June 21-25

**Week #3**- June 28- July 2

**Week #4**- July 6-9 (No Camp on Monday July 5<sup>th</sup>, Observed Federal Holiday for July 4<sup>th</sup>)

**Week #5**- July 12-16

**Week #6**- July 19-23

**Week #7**- July 26-30

**Week #8**- August 2-6

**Week #9**- August 9-13

**Week #10**- August 16-20

**Week #11**- August 23-26 (No camp on Friday August 27<sup>th</sup>)

# 2021 Muhlenberg Summer Day Camp

## Registration Form

Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Gender:  Male  Female

Home Phone Number: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

Special Health Needs/Allergies: \_\_\_\_\_

Parent/Legal Guardian: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Emergency Contact & Authorized Pick-Up:

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Child's T-Shirt Size:  Youth Small  Youth Medium  Youth Large  
 Adult Small  Adult Medium  Adult Large  Adult XL

I would like to purchase an additional t-shirt for my child. (\$10.00)

Please check which weeks your child will be attending:

- |                                                          |                                                        |
|----------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> <b>Week #1-</b> June 14-18      | <input type="checkbox"/> <b>Week #7-</b> July 26-30    |
| <input type="checkbox"/> <b>Week #2</b> – June 21-25     | <input type="checkbox"/> <b>Week #8-</b> August 2-6    |
| <input type="checkbox"/> <b>Week #3-</b> June 28- July 2 | <input type="checkbox"/> <b>Week #9-</b> August 9-13   |
| <input type="checkbox"/> <b>Week #4-</b> July 6- 9       | <input type="checkbox"/> <b>Week #10-</b> August 16-20 |
| <input type="checkbox"/> <b>Week #5-</b> July 12-16      | <input type="checkbox"/> <b>Week #11-</b> August 23-26 |
| <input type="checkbox"/> <b>Week #6-</b> July 19-23      |                                                        |

I am planning on using Before and After Camp Extended Care

### Early Bird Registration Special

#### Register by May 15<sup>th</sup> and PICK YOUR DISCOUNT:

- For every week you check off and your child participates, you will receive a \$5.00 credit only towards the Week #10 fee (up to a \$50 value)
- Sign-up and participate in ALL 11 Weeks and receive the 10<sup>th</sup> week of camp FREE with your prepayment of week #11  
(This includes the camp rate of \$125 and NOT Before and After Care costs)

### Permission for Transportation:

I do  I do not give permission for Good Shepherd to transport my child to and from field trips.

### Permission for Swimming:

I do  I do not give permission for Good Shepherd to take my child swimming.

**Swimming Ability of Your Child:**  Non swimmer  Beginner  Advanced

### Authorization of Emergency Medical Attention:

I give my consent for any and all necessary treatment to be given to my child when in the care of a physician and/or a hospital.

### Parent's Acknowledgement:

I agree to allow my child to participate in the Muhlenberg Summer Day Camp at Good Shepherd Evangelical Church, and I understand that all precautions will be taken to ensure the safety of my child. I hereby release the church, its staff, and volunteers of all liabilities resulting from any of these activities. I also give the church and the camp the permission to use photographs of my child for camp use including advertisement and promotion.

\_\_\_\_\_  
Parent/Legal Guardian Printed Name

\_\_\_\_\_  
Parent /Legal Guardian Signature

\_\_\_\_\_  
Date