



CAMP BY THE SEA 2009 REGISTRATION FORM

Milton and Betty Katz JCC
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CHILD'S NAME FIRST and LAST	CAMP PROGRAM (SEE BELOW)	SHACAR ONLY* TUES/THURS OR MWF FULL DAY OR 1/2 DAY	SHACAR & Kindergarten ONLY* FULL DAY OR 1/2 DAY	BIRTH DATE 0/00/00	SEX M F	AGE AS OF June 1, 2009	GRADE AS OF FALL 2009
1.							
2.							
3.							

CAMP PROGRAM CHOICES

SHACAR EARLY CHILDHOOD CAMP (2 - 4 YRS)
GESHER (K - 1st Grade)
CHAVERIM (2nd - 3rd Grade)
JCC ARTS CAMP (1st - 9th Grade)

NOAR ADVENTURE CAMP (4th - 6th Grade)
ROAD RULZ (7th - 10th Grade)
MOVILIM (L.I.T.'s - Grade 10 Only)

WEEK 1	6/29 - 7/3
WEEK 2	7/6 - 7/10
WEEK 3	7/13 - 7/17
WEEK 4	7/20 - 7/24
WEEK 5	7/27 - 7/31
WEEK 6	8/3 - 8/7
WEEK 7	8/10 - 8/14
WEEK 8	8/17 - 8/21

CAMP WEEKS - JUNE 29, - AUGUST 21, 2009

Please circle which weeks each of your children will be attending

Name _____ 1 2 3 4 5 6 7 8

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Name _____ 1 2 3 4 5 6 7 8

Special Bunk Friend Requests? _____



GENERAL INFORMATION

Family Name _____ With whom does the child(ren) reside? _____

Parental Status (please circle) : Single Married Separated Divorced Remarried Spouse Deceased

Mother's Full Name _____ Father's Full Name _____

E-mail _____ E-mail _____

Home Address _____ City _____ State _____ Zip _____

Local Address _____ City _____ State _____ Zip _____

Home Phone _____ Local Phone _____

Mother Employed By _____ Father's Employed By _____

Mother's Work Phone _____ Father's Work Phone _____

Mother's Cell Phone _____ Father's Cell Phone _____

I am a Family Annual Member

I would like to join as a "Camp Only" Member

YOU MUST BE A KATZ JCC MEMBER or CAMP ONLY MEMBER