

Pine Springs Camp 2024 Day Camp Registration Form

This section for office use only

Mail to:

Pine Springs Camp
371 Pine Springs Camp Rd.
P.O. Box 186
Jennerstown, PA 15547

Tel: (814) 629-9834
Fax: (814) 629-6520
www.pinesprings.org
maddy@pinesprings.org

Date received: ____ / ____ / ____

Check # _____

Credit Card

Cash Amount: \$ _____

Packet Mailed Date: ____ / ____ / ____

Important Information: Please make sure to complete all areas of the registration form with financial information.

Camper Information

Camper's Name: (First) _____ (Last) _____

Father's Name: _____ Mother's Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone Number: () _____ Cell Phone Number: () _____

Boy Girl Age: _____ Date of Birth: ____ / ____ / ____ Grade completed (23-24 School Year) _____

Main Contact e-mail: _____

How did you hear about Pine Springs Camp: _____

Is this your first Day Camp experience at Pine Springs Camp? Yes No

Church attending: _____

Crew Mate Selection

Crew: Each week campers are divided into different crews based on **their age (K-2)/ (3-6) and gender**. Please write the name(s) of the camper(s) your child would like to be in a crew with during his/her week at Day Camp.

Crew Mate Preferences: 1. _____ 2. _____ 3. _____

Camp Session and Elective Selection

◆ Please check the week of PSC Day Camp and an elective for your camper. All campers participate in arts and crafts, sports, nature and swimming. Elective options provide campers with extra time in specific activity areas throughout the week.

____ SESSION 1

June 24-June 28, 2024

(completed K- grade 6)

**limited to 50 campers*

Sports and Recreation

Arts and Crafts

____ SESSION 2

July 8-12, 2024

(completed K- grade 6)

**limited to 50 campers*

Nature

Sports and Recreation

____ SESSION 3

July 29-August 2, 2024

(completed K- grade 6)

**limited to 50 campers*

Sports and Recreation

Arts and Crafts

Payment Information

◆ **The cost for camp is \$115 for the full week. A \$25 non-refundable deposit must be received to reserve a space at camp.** Please be aware that space is limited and offered on a first come basis. Pre-registration is required. **Please contact the office to check availability if you are considering registering within one week of the session.** Remaining balances are due the first day of your camper's session and can be paid at the registration table.

Payment:

Pre-registration

Cost of Camp: \$ 115.00

Deposit: - 25.00

Remaining Balance: \$ _____

Credit Card Payment:

Credit: MC VISA DISC

Amount of Payment: _____

Name on Credit Card: _____ CVC: _____

Credit Card Number: _____ Exp. Date: ____ / ____

Signature: _____

**By signing this form I am authorizing Pine Springs Camp to charge my credit card for the Amount of Payment written above.*