

Palisades Day Camp Registration 2008

Sessions: June 16-20, June 23- 27, June 30 -July 3, July 7-July 11, July 14-July 18, July 21-July 25,
Jul 28-Aug -1, Aug 4-Aug 8, Aug 11 - Aug 15

Time: 11 am—3 pm

Amenities: The camp will provide a snack each afternoon. Lunch is included on Friday.

Ages: ages 5 (must have competed kindergarten) to 12 years of age (campers must be able to swim one length of the pool). (Teens 13 and over may apply to be volunteers at the camp and receive community service credit. Please use the same registration form below.)

Cost: \$150 per week for first two weeks. \$125 per week for additional children and additional weeks

(There is no camp on July 4th and the price of that week will be \$120)

Registration: Camp is open to members of the Palisades Pool and their guests. Guests **must** be sponsored by a Palisades pool member and the member's child must attend the same session along with their guest. Additional guest fees apply to guests. Contact Brenda Holt @ Holtbrenda@aol.com for details.

Lunch: Monday - Thursday may be purchased for an additional \$20. It is provided by our café. Items such as chicken nuggets, hot dogs, sandwiches, chips, drink, and dessert will be served. Friday lunch is free and included in your fee.

Addition Information: Camp meets at the beginning of the day at the tables on the upper deck. Camp will be held rain or shine. (Thunderstorms excluded). There are no make-ups or refunds available due to inclement weather. We reserve the right to cancel a week if there is low attendance; the pool member will receive a full refund. You may cancel four weeks in advance and receive a full refund, from two to four weeks receive half a refund, and less than two weeks there is no refund.

Palisades Day Camp 2008 Registration Form

Name of camper(s): _____ age: _____ male female
_____ age: _____ male female
_____ age: _____ male female

Parent's Name: _____

Address: _____

Home Phone _____ Cell Phone _____

Email: _____

Person Responsible for picking up child _____

Weeks applied for:

June 16-20 June 23-27 June 30-3 July 7-11 July 14-18 July 21-25
 Jul 28- Aug 1 Aug 4-8 Aug 11 - 15

Lunch additional \$20.00: Circle: Yes or No

Amount Paid _____ Check # _____ Send a check made out to Palisades Pool to Brenda Holt, 7525 Royal Dominion Drive, Bethesda, Maryland 20817-4660. . Please contact Brenda Holt at 301-365-5848 or HoltBrenda@aol.com if you have any question