



# YOUTH SUMMER DAY CAMP 2021



**Ages 6 – 10 Location: Independence Middle School Cafeteria**

Activities include sports, arts & crafts, swimming, and special projects. Themes and activities will vary each week. The cost of Field Trip Visitors is included in the registration fee. **An informational Parent Packet containing 3 additional forms MUST be returned with the attached registration form.** Packets are available at the Bethel Park Community Center or can be downloaded and printed from the Recreation page on the Municipal website: [www.bethelpark.net](http://www.bethelpark.net).

You may register for up to EIGHT (8) separate weekly sessions that will begin on Monday, June 14 and continue through Friday, August 6. **\*NO CAMP MONDAY, JULY 5.** Child MUST be 6 years old prior to the first day attending camp and not more than age 10 by the last day attending camp. Ages 11-14 may attend Summer Fun Camp at the Community Center. **ALL CAMPERS MUST BRING A WATER BOTTLE DAILY.**



**MORNING SESSION: 9:00 AM - NOON AFTERNOON SESSION: 12:30 - 3:30 PM**  
**FEE: \$85 per week (for 1 child / one session) Non-resident add \$10 per child per week**



**ALL DAY SESSION: 9:00 AM - 3:30 PM FEE: \$150 per week (for 1 child / all day)**  
**Non-resident add \$20 per child per week All-day campers must also bring a lunch daily.**

Early drop-off (7:00 AM) or late pick-up (6:00 PM) services will be available for \$20.00 each per week. One week, all day from 7:00 AM - 6:00 PM would add \$40 for early and late services. Please use the attached YOUTH SUMMER DAY CAMP REGISTRATION FORM to register your child for this program, **one form for each child.** Make checks payable to "Bethel Park Recreation" and return with all completed forms to:  
5151 Park Avenue, Bethel Park, PA 15102.

**Space is limited. THERE ARE NO REFUNDS FOR DAY CAMP.** Questions? Call the Recreation Office 412-831-1328.

SESSIONS	1 week	2 weeks	3 weeks	4 weeks	5 weeks	6 weeks	7 weeks	8 weeks
one session	\$85	\$170	\$255	\$340	\$425	\$510	\$595	\$680
all day	\$150	\$300	\$450	\$600	\$750	\$900	\$1050	\$1200

## YOUTH SUMMER DAY CAMP 2021 REGISTRATION FORM ages 6-10

One child per form, please. You may make copies. Medical, Emergency & Permission Forms Required w/ Registration.

NAME: \_\_\_\_\_ BIRTH DATE: \_\_\_\_\_ AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ Male/Female circle

PHONE: home ( ) \_\_\_\_\_ cell ( ) \_\_\_\_\_ B P Resident? Yes / No

E-mail: \_\_\_\_\_ Amount Enclosed: \_\_\_\_\_

Please mark (X) EACH week and session you wish to attend:

Optional: \$20 extra for each

WEEK	DATES	AM Only	PM Only	ALL DAY	EARLY	LATE
#1	6/14 - 6/18	_____ (201)	_____ (251)	_____ (281)	_____	_____
#2	6/21 - 6/25	_____ (202)	_____ (252)	_____ (282)	_____	_____
#3	6/28 - 7/2	_____ (203)	_____ (253)	_____ (283)	_____	_____
#4	*7/6 - 7/9	_____ (204)	_____ (254)	_____ (284)	_____	_____
#5	7/12- 7/16	_____ (205)	_____ (255)	_____ (285)	_____	_____
#6	7/19 - 7/23	_____ (206)	_____ (256)	_____ (286)	_____	_____
#7	7/26 - 7/30	_____ (207)	_____ (257)	_____ (287)	_____	_____
#8	8/2 - 8/6	_____ (208)	_____ (258)	_____ (288)	_____	_____



\* no camp 7/5

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office use only:

Session Fee: \$ \_\_\_\_\_ E / L Fee \$ \_\_\_\_\_ Amount Due: \$ \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_ Cash Check # \_\_\_\_\_

Activity # 3128. \_\_\_\_\_ Date Received \_\_\_\_\_

Medical Form Received \_\_\_\_\_ Permission Received \_\_\_\_\_ Emergency Form Received \_\_\_\_\_