

CAMP BRIGANTINE 2023

at
BRIGANTINE ELEMENTARY SCHOOL GYM
301 E. Evans Blvd., Brigantine, NJ 08203

7 Weeks
June 26th to August 11th
9:00 A.M. to 4:00 P.M.

Children Entering 1st through 6th Grades
Fee Structure:

	<u>3 Weeks</u>	<u>4 Weeks</u>	<u>5 Weeks</u>	<u>6 Weeks</u>	<u>7 Weeks</u>
1 st Child	\$1200.00	\$1300.00	\$1400.00	\$1500.00	\$1600.00
2 nd Child	\$1500.00	\$1600.00	\$1700.00	\$1800.00	\$1900.00
3 rd Child	\$1900.00	\$2000.00	\$2100.00	\$2200.00	\$2300.00

Attendance Option: The camper may attend Camp Brigantine for 3, 4, 5, 6 or the entire 7 weeks. The weeks must be selected at the time of registration. Once the weeks are selected there can be **no change**.

We are also offering the option of the child attending for one or two weeks. The cost would be \$300.00 per week. Please contact the CER office at 264-7350 Ext. 1 for more information.

A \$100.00 deposit, per child, will be due at registration with the balance due by June 27th.

Payment must be in form of **check** or **money order** payable to **BRIGANTINE CER**, 265 42nd Street, Brigantine, NJ 08203.

NO CASH ACCEPTED!

Refund policy: Prior to June 13 - 100%
Prior to June 20 - 75%
Prior to June 27 - 50%

NO REFUNDS- After June 26th

We reserve the right to dismiss any camper whose conduct is detrimental to the camp and no refund will be issued. No deduction is made for late arrival or early departure. No refund will be made for withdrawal or absence due to illness or family vacations.



**There will be a \$200.00 Discount for those who apply
for the full 7week program by February 15,2023**

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FEATURES

Professional Supervision: Camp Director is a certified teacher
Experienced Camp Counselors
Trained Medical personnel on site daily

Enrichment Subjects: Computers Arts & Crafts
Music Yoga
Reading Chess

Activities: Swimming Softball
Basketball Special Events
Soccer Indoor games
Volleyball Fitness

Theme Days: Every Thursday will be a "Theme Day"

(Tentative)
Field Trips: Pirate Adventures Boat Ride
Cape May County Zoo
Egg Harbor City Lake Day
Atlantic City Aquarium
Dolphin Cruise

Camp Notes: - Lunches are the responsibility of the parents.
- Snacks and drinks will be provided.
- All Campers will receive a T- shirt.
- Bus transportation is **not** available.
- Parents are responsible for the child's accident and health insurance coverage.

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REGULATIONS

1. Camp hours are 9:00 A.M. to 4:00 P.M. Please do not drop off your child early.
2. Parents must give appropriate notification to the staff if the child is going to be absent. Please call **John Clement - 561-714-0929** either before the absence occurs or between 8:00 a.m. and 9:00 a.m. on the day of the absence.
3. On field trip days, campers must bring a bag lunch along with a drink. Money is optional, but the camper is solely responsible for his/her own money. Campers must wear their camp shirts on field trip days so they can be easily identified.
4. On Beach Days we will require campers to bring beach attire, beach shoes, towels and sunscreen.
5. We understand that campers are going to bring phones to camp but we will make an effort to monitor the amount of time campers are spending on phone and expect phone use to be limited.

DISCIPLINARY PROCEDURES

A disciplinary problem exists when a child is disrupting the Camp by either requiring constant one on one attention, inflicting physical or emotional harm on other children or staff, or is unable to conform to the rules of the Camp.

Step 1

Child will be prohibited from participating in specific activities (i.e. play time, computer time) for a specific period of time (to be determined by Camp Director).

VERBAL notification to parents as to extent of problem.

Step 2

Conference with parent to discuss problem and solution.

WRITTEN notification to parents.

Step 3

Suspension for specific period of time (as determined by Camp Director).

WRITTEN notification to parents.

Step 4

Permanent removal from program.

WRITTEN notification to parents.

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APPLICATION

(Please Print)

Camper's Name _____ Grade in September 2023 _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Sex (Circle) M F Date of Birth _____

Mother's Name _____ Work phone # _____

Father's Name _____ Work phone # _____

EMERGENCY Contact _____

Relationship _____ Telephone # _____

The Camper will attend the entire seven weeks of Camp.

The Camper will attend three to six weeks of Camp - please select the weeks by placing an X in the appropriate boxes:

June 26 – June 30

July 24 – July 28

July 3 – July 7

July 31 – August 4

July 10 – July 14

August 7 – August 11

July 17 – July 21

I hereby authorize the staff of Camp Brigantine to act for me according to their best judgment in any emergency requiring medical attention and I hereby waive and release Camp Brigantine from any and all liability for any injuries or illnesses incurred while at Camp. I have no knowledge of any physical impairment that would be affected by the above named Camper's participation in the Camp program.

Parent/Guardian _____ Date _____

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Camper's Name _____ Grade _____

(Please Print)

One **FREE T-shirt** included with application - Shirt Size (**ADULT SIZES**):

Youth – Large _____ Adult - Small _____ Adult - Medium _____

Adult - Large _____ Adult - X Large _____

I would like to purchase Additional T-shirts _____ @ \$10.00 per shirt = _____

Please make checks payable to: Brigantine C.E.R.

PERMISSION SLIP to ATTEND FIELD TRIPS

I give my child _____ permission to attend any of the scheduled field trips for the time period within which my child is enrolled in Camp Brigantine.

Date _____ Parent/Guardian Signature _____

PERMISSION SLIP to WALK HOME

I give my child _____ permission to walk home from Camp Brigantine.

Date _____ Parent/Guardian Signature _____

MEDICAL PROFILE

(Please **circle** answers)

Immunizations Updated: Yes - No

Allergies: Yes – No _____

Allergic to stings: Yes – No Will medication need to be dispensed?: Yes - No

Asthma: Yes - No What medication and time: _____

Is there any other condition we should be aware of? Please explain: _____

EMERGENCY CONTACT: _____ EMERGENCY #: _____