## <u>Musconetcong Valley Community Association</u> – <u>Camp 2022</u> – (908) 876-3141 *Application for Camp Musconetcong and Explorers Camp with optional transportation*

Application for Camp Musconetcong and Explorers Camp with optional transportation Please note: a separate application is required for each camper. Print clearly, especially phone numbers

Child's Nam	ne:						Grade	in fall: _	M/F
Home Addre	ess:				(C	ity, Stat	te, Zip)		
Home Phone	Home Phone Number: School:								
Email: (for MVCA use only) Age: DOB:									
Mother's Nar	me:								
Cell Phone:			_		Cell Phone:				
Place of Emp	loyment:				Place of Employment:				
Business Add	lress:	Houre		—   Ви Ви	Business Address:     Business Phone:   Hours:				
Dusiness Filo		110015	·	-   <sup>Du</sup>					
In case of an emergency in which a parent cannot be reached, please provide at least one local contact who will assume responsibility for your child:									
Name:				Nan	ne:				
Address:				Add	ress:				ell
Phone:		Cell:		_ Pho	ne:			C	ell
Relationship to	Child:			–   <sup>Rela</sup>	ationship	to Child:			
	The individuals na	med below have	e my peri	mission	to pick u	p my chi	ld on the	followin	g days:
Name:				Na	me:				
Address:				Ad	dress:				
Phone:	Address:Cell Phone:				Address: Phone:Cell Phone: Relationship to Child:				
Monday      DTuesday      DWednesday      DThursday      DFriday     DMond				□Monday □Tuesday □Wednesday □Thursday □Friday					
_									
MY CHILD WILL ATTEND THE CAMP AND SESSIONS INDICATED (check all that apply):         CM = Camp Musconetcong (Long Valley-Rock Spring Park)       BC = Before Camp supervision (7:00 - 9:00am)         EX = Explorers Camp (choose drop off/pick up site or bus)       BC = After Camp supervision (4:00 - 6:00pm)         CV = Mount Olive Before Care, After Care or Bus Stop at       BC = Before Camp supervision (4:00 - 6:00pm)         LM = Liberty Meadows/Mansfield Bus Stop (also check the place your child will get on/off the bus below)*									
Week 1 "N Week 2: "V Week 3: "C Week 4: "A Week 5: "I Week 6: "S Week 7: "F Week 8: "L Week 9: "N	C is for" A is for" is for" S is for" I is for" J is for"	6/20 - 6/24 6/27 - 7/1 7/5 - 7/8 7/11 - 7/15 7/18 - 7/22 7/25 - 7/29 8/1 - 8/5 8/8 - 8/12 8/15 - 8/19	□ CM □ CM □ CM □ CM □ CM □ CM	EX     EX	□ BC □ BC □ BC □ BC □ BC □ BC	□ AC □ AC □ AC □ AC □ AC □ AC □ AC □ AC		□ LM □ LM □ LM □ LM □ LM	(2)
LM BUS STOP – Great Meadows Middle School or Weis in Mansfield									
CIT Program at CM 7 (make-up week 8/1 – 8/5)			7/5 – 7	/29	□ CM	□ MO	□ LM	□ BC	C 🗆 AC
As the parent/legal guardian of the above-named child, I certify that the foregoing program selections are complete (subject to additions) and correct to the best of my knowledge, and I acknowledge responsibility for full payment of all applicable tuitions and fees (see Registration/Tuition information section of MVCA Summer Day Camp Guide 2021).									
Parent or legal guardian's signature: Date:									
FOR OFFICE USE ONLY									

EONLY	Date Received:	Deposit F	Received:		Check Number:	CC
	File Number:	Α	В	C	Registration Fee:	

## \*\*MUST BE COMPLETED AND RETURNED BEFORE YOUR CHILD WILL BE REGISTERED FOR CAMP\*\*

*** MUST BE COMPLETED AND REI	I URNED BEFORE FOUR CHILD	WILL BE REGISTERED FOR CAMP				
Child's Name:	Grade in Fall:	Sex: Age: DOB:				
	f Child's Physician: Physician's Phone:					
Address of Physician:						
	licable dates – If NO PROBLEM,					
Heart Trouble:	Measles:	Mumps:				
Kidney Trouble:	Seizures:	Fainting:				
Asthma (Give Details):		Allergies				
Behavior: Penicillin or other drug reactions:		Allergies:				
Reactions to Insect Bites or Stings:		Check if never been stung				
Does your child have any other special problems or needs that the staff should be aware of?						
Is your child now receiving medication? _	If yes, what?	Give at camp?				
Immunizations: Give most recent dates	• • •	•				
DPT: Polio Series:	Mumps:	Hepatitis B <sup>.</sup>				
Tetanus:	Rubella:	COVID-19:				
Check here i	f you have attached a copy of the	physician's record.				
	pmitted immunization dates last ye					
I hereby certify that the information herein provided is <u>complete</u> and correct to the best of my knowledge, and that this child is in good health and can participate in the normal activities of the program. In the event that I cannot be reached in an emergency, I give the MVCA permission to seek emergency transportation for my child, and for the physician selected by the Director of the MVCA program to hospitalize and/or otherwise secure proper treatment, including anesthesia and surgery, for the above named child.  Parent or legal guardian's signature: Date: Date: Please initial if the camp staff has permission to help your child apply sun block and/or insect repellent provided by you (INITIALS) This must be initialed for your child to have these products applied while at camp.						
My above named child has permission to participate in all activities that are part of this program, including field trips and swimming. Parent or legal guardian's signature: Date:						
I give permission for MVCA to use any photos of my child taken during this program for publicity or program literature. Parent or legal guardian's signature: Date:						
Please provide details about any child custody arrangements in place, including days each parent is allowed to pick up the child from camp. If no custody situation is applicable, please check and sign.						
Parent or legal guardian's signature: Date: Date:						
*If any of the information provided changes, it is the responsibility of the parent or guardian named above to notify the MVCA <u>in writing</u> .						
Please mail this application with payment	to MVCA, P.O. Box 399, Long Va	alley, NJ 07853 or hand-deliver to the				

MVCA at the Valley Professional Center, 59 East Mill Rd., Building 3, Unit 101, Long Valley. Those paying by credit card may also fax to 908-876-9435 or email to <u>director@mvca.org</u>. Please do not write any credit card information on this application.

Thank you for registering your child/children for MVCA Camp 2022 – "The best summers EVER just keep getting BETTER!"