



BCIT Summer Camp

2019 Paper Registration Form



Name Camper: _____

Date of Birth _____ Grade in Fall 2019 (circle one): 6 7 8 9 10

Address _____

Adult T-Shirt Size: (circle one) S M L XL 2XL

Parent/Guardian Email: _____

Parent/Guardian Phone Number: _____

Emergency Contact Name: _____

Emergency Contact Phone Number: _____

Desired Camp(s):

Camp Name and Number	Week	Cost
1. _____	_____	\$ _____
2. _____	_____	\$ _____
3. _____	_____	\$ _____

Total: \$ _____

Parent/Guardian Signature: _____

All payments due by June 1, 2019.

No refunds will be issued after July 1, 2019.

Payment Information

Make Checks or Money Orders Payable to: **BCIT Summer Camp**

Return Registration, Media Use and Emergency Contact Form to:

BCIT Summer Camp 2019

c/o Monique S. Jenkins, 695 Woodlane Road, Westampton, NJ 08060

Please note: *Camp registration is based on a first-come, first-served basis. You will receive a confirmation email once your summer camp application has been processed. Transportation and lunch are not provided.*