

Cedarcroft School S.T.E.A.M Camp Schedule Selection Form

Please check next to the camps you would like to attend.

(Complete desired schedule at the bottom of the form.)

*May 28th-31st (4 days)	Vikings/Soccer Shots	_____
June 3rd-June 7th	Nature and Camping	_____
June 10th-June 14th	Build and Create	_____
June 17th-June 21st	Knights, dragons, princesses & Castles	_____
June 24th-June 28th	Super Heroes	_____
*July 1st-July 3rd (closed on the 4th & 5th)	American Heroes -Will you be one too?	_____
<small>*Must meet a minimum enrollment of 20 children by March 1st to hold this camp.</small>		
July 8th-July 12th	Pirates, Privateers & Tall Ships	_____
July 15th-July 19th	The Ocean & Its Creatures	_____
July 22nd-July 26th	Dinosaurs & Fossils	_____
July 29th-August 2nd	Australia-Walk about with us Mate!	_____
August 5th-August 9th	Oopy Goopy Art	_____
August 12th-August 16th	Science-It's a weird, wild world	_____
August 19th-August 23rd	Space-Explore our Universe	_____
*August 26th-August 28th (3 days)	Dr. Seuss	_____

A discount of 3% will be given for registrations (with deposit) received by February 28, 2019.

Please check all that apply for the week(s) you are attending

___ 7:30 or ___ 8 a.m. to 9 a.m. **Before** Camp Care \$12.00 hour (\$10 if enrolled full time)
 9 a.m. to 12 p.m. Morning Session _____ \$185.00 per week or \$40.00 per day
 12:00 p.m. to 3 p.m. Afternoon Session _____ \$185.00 per week or \$40.00 per day
 ___ 3-4 p.m. **After** Camp Care ___ 4-5 p.m. **After** Camp Care ___ 5-6pm \$12.00 per hour (\$10 if enrolled full time)

Please Check Days Attending: M ___ T ___ W ___ TH ___ F ___

You may choose two, three or five days for your children.

*These weeks will be prorated as they are shorter weeks. **A \$25.00 enrollment deposit for each week of camp is due with this enrollment form.**

Child's Name: _____ DOB: _____

Parent's Name(s): _____

Address: _____

Home Phone: _____ Work Phone(s): _____

Cell Phone(s): _____ Email Address(es): _____

Parent Signature: _____

Cedarcroft School, LLC
419 Cedarcroft Road
Baltimore, MD 21212
APPLICATION FOR CAMP ADMISSION

Kate L. Gentry
Headmistress

Child's full name:

Birth date:

Nickname:

Home address, incl. zip:

Home Telephone:

Cell Phone(s):

Allergies:

Religious Affiliation:

Previous schooling/Camps:

Email Addresses:

Father's name:

Work phone:

Mother's name:

Work phone

Emergency Contact:

Phone Numbers:

Emergency Contact:

Phone Numbers:

Emergency Contact:

Phone Numbers:

Persons allowed to pick up your child(ren):

Please enclose a \$25 deposit for each week of camp payable to:
Cedarcroft School

Mail Payment to:
Cedarcroft School - Gentry
P.O. Box 180, Freeland, MD 21053
Freeland, MD 21053

Cedarcroft School Camp does not discriminate in the admission of campers or the employment of staff. Students are grouped according to performance rather than chronological age. Manners are stressed. Completed health, immunization and emergency forms must be received prior to the first day of camp. These forms are available on our website.

Parent Signature: _____

Telephone number: 410) 435-0905 Facsimile Number: 410) 329-6725 cedarcroftschoolbalt@gmail.com cedarcroftschool.com
419 Cedarcroft Road Baltimore, MD 21212