

210 9th Street, Suite 1 Jersey City, NJ 07302 (201) 420-8111 admissions@scandischool.com scandischool.com

Child's Full Name:

Date of Birth:

FOREST SUMMER CAMP 2024

Choose Camp:	Dates	Forest Camp Programs	Price	Meals
	June 10-July 12*	Full- Day 8:30-4:00pm	\$4,900	Includes snack + lunch + snack
	June 17-July 12*	Full- Day 8:30-4:00pm	\$4,000	Includes snack + lunch + snack
	July 15-Aug 16	See separate application for the entire camp schedule.		
		Extended Day "Fritids" \$100/week 4pm-5pm		k

*June 19: Closed in observance of Juneteenth

*July 4: Closed in observance of Independence Day

Join us as we visit nearby parks and nature habitats to explore local flora and fauna in our Forest Summer Camp. Children will take a bus to spend whole weeks at different locations, such as the marina and bird habitats at Liberty State Park and the marshes of Lincoln Park, as well as weekly trips to nature preserves such as South Mountain Reservation, Eagle Rock, Tenafly Nature Center and the Meadowlands. They will become intimate with the unique natural features of each place. After spending the mornings off site, they will return to school, where they will rejoin the regularly-themed camp activities, including games, crafts and sports.

*Please note, this program is for 4-9 year olds, and can only be registered for as a block of 4 or 5 weeks.

Early Bird Discounts:

Sign up for 5-9 weeks of camp: 5% discount Sign up for all 10 weeks of camp: 10% discount *Must be registered by March10 to receive discount.*

Please include a deposit of \$400 (4 weeks) or \$500 (5 weeks) upon registration (non-refundable). Full balance due May 1.

Applications are due on March 10 and will be accepted in the order in which they are received.

PARENT INFORMATION

Parent Name:							
Home address:							
City:	State:	Zip Code:	Country:				
Home Phone:	(Cell Phone:					
Email address:							
Occupation:							
Employer:							
Business Address:							
City:	State:	Zip Code:	Country:				
Business Phone:							
	PARENT INF	ORMATION					
Parent Name:							
Do both parents live together? □ Yes □ No							
If no, please give home address:							
City:	State:	Zip Code:	Country:				
Home Phone:	(Cell Phone:					
Email address:							
Occupation:							
Employer:							
Business Address:							
City:	State:	Zip Code:	Country:				
Business Phone:							

CHILD'S INFORMATION

Child's Full Name:	Date of Birth:					
Preferred gender pronoun:	pronoun: Does the child live with both parents?					
If no, please give home address:	· ·					
City:	State: Zip Code: Country:					
Has your child attended school before?	∕es □ No					
If so, which school?						
Please describe your child overall:						
Does your child speak any foreign languages?	? □ Yes □ No					
If so, which languages?						
Does your child have any food allergies or other medical issues?						
Any additional information you wish to share al	bout your child?					
The selection for a complete most in the Completion	view Cales al of James Cityl					
Thank you for your interest in the Scandina	wian School of Jersey City!					
Parent Signature	Date					
Parent Signature	Date					