

REGISTRATION FORM

Camper Name: _____

Address: _____

Date of Birth: _____ Male/Female: _____ T-Shirt Size: _____

Are there any allergies we should be aware of? _____

Parent/Guardian Name: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____

Emergency Contact: _____

Home Phone: _____ Business Phone: _____

Cell Phone: _____

Parent/Guardian Signature: _____

Please check each session(s) that your child will be attending.

	DATES	THEME
<input type="checkbox"/> Session 1	6/10/19-6/14/19	Botany
<input type="checkbox"/> Session 2	6/17/19-6/21/19	Creative Design
<input type="checkbox"/> Session 3	6/24/19-6/28/19	Culinary Arts
<input type="checkbox"/> Session 4	7/1/19-7/5/19	Stem
<input type="checkbox"/> Session 5	7/8/19-7/12/19	Financial Findings
<input type="checkbox"/> Session 6	7/15/19-7/19/19	Myths and Legends
<input type="checkbox"/> Session 7	7/22/19-7/26/19	Grossology
<input type="checkbox"/> Session 8	7/29/19-8/2/19	Local Pride
<input type="checkbox"/> Session 9	8/5/19-8/9/19	Uncharted Territories
<input type="checkbox"/> Session 10	8/12/19-8/16/19	Environmental Explorers
<input type="checkbox"/> Session 11	8/19/19-8/23/19	Toward A Better World

To register your child for our camp program, please return this completed form, along with the non-refundable registration fee of \$150 as well as a deposit. Please make checks payable to: "Bright Horizons Family Solutions."



Bright Horizons at Exton | 640 Rice Blvd.
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exton@brighthorizons.com |