



SUMMER DAY CAMP

Sponsored by
Blairstown Dept. of Recreation

Our very popular Day Camp Program offers weeks of socialization, entertainment, and recreation! Our Day Camp with Mrs. Besser, Mrs. Truelove, our enthusiastic staff of teachers and counselors will keep our campers happy! Our campers will have a blast with our special events, crazy contests, arts & crafts, Tidal Wave Tuesdays, and special entertainment. Our campers go home with special projects, surprises, and a smile on their face and **GREAT** memories! Priceless! (sneakers required)

WHO: PRE-SCHOOLERS: Ages 4 & 5 (must turn age 4 by October 1, 2023)
GRADES: K - 6th (Grade in now - Currently as of June 13, 2024)

WHEN: Monday thru Friday, June 24 - July 5 - Closed July 4th

TIME: 9:00 am - 12:00 noon **WHERE:** Blairstown Elementary School

FEE: On or Before 5/21 Blairstown Residents \$95. / non-residents \$110.
After 5/21 Residents \$105.00 / non-residents \$120.00
Checks Payable to: Blairstown Recreation Department

REGISTRATION: At the Recreation Office: Tues. & Thurs. - 8:00 am - 1:00 pm
Or Mail in to: Recreation Department, 106 Route 94 Blairstown, NJ
Or drop off box located outside the Municipal Building - 24 hours
REGISTRATION CLOSES - June 11th - or if Camp fills at earlier date.

Sorry No Exceptions! Phone or email registration is not accepted.

All Registrations - Mail-in, Drop Off Box and In Person Must
be received by June 11th

QUESTIONS? Contact the Recreation Office at 362-6663 x232
Patricia M. Sagan, Director

Registration on the reverse side - 1 form per Camper!



This form must be submitted with payment on or before June 11th

**Blairstown Department of Recreation
Summer Day Camp – 2024 Registration/Waiver Form**

Our Summer Day Camp program offers the following special activities that parents/guardians must be aware of and must provide their additional consent for participation:

One Form per Camper Please print neatly

Decorating & Consumed		
Cookie/Cupcake (dyes & food ingredients are used)	_____ Can	_____ Cannot
Freezer Pops – Consumed (food dyes are used)	_____ Can	_____ Cannot
Tattoo/Face Painting (dyes/paints are used)	_____ Can	_____ Cannot

Name _____ Age _____ DOB _____

Pre-school Child must have turned AGE 4 by October 1, 2023

Grade (completing as of June 11, 2024) _____ School Student Attends _____

Address _____ Telephone #1 _____

Emergency Phone #2 _____ Medical Problems _____

Email _____

I have read the above activities and have checked what my child can/cannot participate in. I am aware that Freezer pops and the Cookie/Cupcakes may be consumed during the Day Camp hours. I understand that if I grant permission for my child to participate as noted above, and my child requires the use of an Epi-Pen for allergies to food and or insects or the use of an inhaler or any other medical treatment that he or she may need, I am responsible for being in attendance during the times that those activities operate. I understand the instructor, staff and volunteers cannot administer any medical assistance or aid in case of an emergency. I understand in the case of an emergency, 911 will be contacted along with the contact numbers I have listed on this form. I understand the School Nurse is not on duty during the time this program operates. I give permission for my child to participate in all the additional activities and events offered in this program. I am aware that Blairstown Twp. does not provide accident insurance. I agree to hold harmless the Twp., staff and volunteers from any liability for any injury which may occur while in this program. I give permission to use any photo/video of my child. Parents Signature _____ Date _____

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General Helpful Information.....

- *Please park in the BES parking lot and walk your child to the Gym lobby entrance. Our Staff will be outside the entrance to welcome all campers.
- *Doors open at 8:55 am and close at 9:10 am. Please arrive at 11:55 for the 12 noon dismissal. Please wait at the Gym entrance for your child.
- *It is recommended that your child bring a water bottle labeled with their name, we do take water breaks often. Please do not send a snack.
- *Campers will be outdoors at times, it would be advisable to apply sunscreen before they leave home. It is recommended checking for ticks at the end of each day.
- *Campers should wear comfortable clothing and sneakers.
- * The first day you will receive a handout with each days fun activities & special events!



THE MAKERY ART CAMP

SPONSORED BY BLAIRSTOWN DEPARTMENT OF RECREATION

Join The Summer Makery Art Camp! This is a new and exciting Art Camp that all will surely enjoy! Daily themes will include a variety of mediums, styles, and techniques through hands on art making and experimentation. Explore painting, printing making, clay, collage and more!

WHO: Grades 3 through 6 (as of June 13, 2024)

WHEN: Monday - Thursday, July 8 - July 11

TIME: 9:00 am - 12:00 pm **WHERE:** B.E.S.- Art Room

FEE: \$140. / non-res \$150.

REGISTRATION: Opens April 9th At the Recreation Office

Tues. & Thurs. 8:00 am - 1:00 pm

or Mail in or Drop off box:

Recreation Department, 106 Route 94, Blairstown, NJ 07825

Registration closes on June 20th or if the camp fills at an earlier date.

Patricia M. Sagan, Director

The Art Makery Camp- Registration/Waiver Form

Name _____ Grade Completed as of June 13th _____

Address _____ Phone #1 _____

Medical Problems _____ Emergency Phone #2 _____

Email Address _____ School Student Attends _____

I give permission for my child to participate in all the activities and events offered in this program. I am aware that Blairstown Twp. does not provide accident insurance. I agree to hold harmless the Twp., staff and volunteers from any liability for any injury which may occur while in this program. I understand the Instructor, staff and volunteers cannot administer any medical assistance or aid in case of an emergency. I understand in case of an emergency 911 will be contacted along with the contact numbers I have listed on this form. I understand the School Nurse is not on duty during the time this program operates. I give my permission to use any photo/video of my child. Parents Signature _____ Date _____

USA

USA SPORT GROUP

SPORTS

SUMMER CAMPS

BLAIRSTOWN
RECREATION

CAMP CLASSES

AGE 5 - 11.9

Summer Schedules Online Now
More Sports Options Available

SCAN TO VIEW
SCHEDULES & REGISTER



SUMMER SCHEDULE

All programs take place in Blairstown, NJ

Summer Camps start in July

Camps take place five days a week for 90 -150 mins

More details, full schedule and pricing online

MULTI-SPORTS CAMP: 7/22-7/26

Age 5-11.9: Mon - Fri, 9:00am - 12:00pm, \$205

SOCCER CAMP: 7/29-8/2

Age 5-7.9: Mon-Fri, 9:00am - 10:30am, \$129

Age 8-10.9: Mon - Fri, 10:45am - 12:15pm, \$129

TENNIS CAMP: 7/15-7/19

Age 5-7.9: Mon - Fri, 9:00am - 10:30am, \$145

Age 8-10.9: Mon - Fri, 10:45am - 12:15pm, \$145



REGISTER TODAY AT
USASPORTGROUP.COM

NEED HELP? CONTACT US TODAY

866 345-BALL

Art Magic Camp



Sponsored by Blirstown Dept. of Recreation

The Art Magic is designed specifically for our little Artists. We will cover a wide range of media from clay, painting, drawing, soft sculpture, portraits, cartooning and more. The Camp is taught in an individualized fashion so that many ages can work together. Each of our young artists will bring home many art projects along with special memories.

Remember to Dress for the Mess - Art Smock recommended!

WHO: Boys & Girls Grades K-3 (as of June 13, 2024)

WHEN: Monday through Thursday, July 8th through July 11th

TIME: 9 am-12:00 noon WHERE: B.E.S. Small Cafeteria

FEE: \$125./non-res \$135.

REGISTRATION: Opens April 9th At the Recreation Office

Tuesdays & Thursdays 8:00 am - 1:00 pm or Mail in or Drop off box:

Recreation Department, 106 Route 94, Blirstown, NJ 07825

Registration closes June 20th or if the program fills at an earlier date.

Patricia M. Sagan, Director

Art Magic Camp- Registration/Waiver Form

<u>Name</u>	<u>Grade</u>	<u>Completed</u>
<u>Address</u>	<u>Phone #1</u>	
<u>Medical Problems</u>	<u>Phone #2</u>	

EMAIL ADDRESS

I give permission for my child to participate in all the activities and events offered in this program. I am aware that Blirstown Twp. does not provide accident insurance. I agree to hold harmless the Twp., staff and volunteers from any liability for any injury which may occur while in this program. I understand the Instructor, staff and volunteers cannot administer any medical assistance or aid in case of an emergency. I understand in case of an emergency 911 will be contacted along with the contact numbers I have listed on this form. I understand the School Nurse is not on duty during the time this program operates.

I give my permission to use any photo/video of my child.

requirements. Parents Signature _____ Date _____