



**Manhattan Day School
Summer Camp 2012
Application**

Child's Name _____ Birthday _____

(Last) (First)

Address _____

City _____ State _____ Zip _____

Home # _____

Father's Name _____ Cell # _____

Email _____ Work# _____

Mother's Name _____ Cell # _____

Email _____ Work # _____

Emergency contact _____

Home # _____ Cell# _____

Current School _____ Grade _____ Age _____

School in Fall 2012 _____ Grade _____ Age _____

Please fill in appropriate program:

- Toddler Program Until 12:30pm
- 3 Year Old Program until 2:00pm
- 3 Year Old Program until 3:30pm
- 4 Year Old Program
- 5 Year Old Program
- 6 Year Old Program
- 7 Year Old Program
- Both Sessions
- First Session Only
- Second Session Only

Please make checks payable to MANHATTAN DAY SCHOOL and mail the application and registration fee to Manhattan Day School, Summer Camp Program, 310 West 75th street, New York, NY 10023.

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW:

Enclosed please find \$300 (per child) registration fee. This fee will be applied against total charges.

I hereby give permission for my child to participate in the various excursions which occur during the summer as part of the regular summer day camp program.

Please Sign _____

(Signature of Parent)

(Date)