

# Cornerstone Camp



**Cornerstone Camp offers our community the best value for your child's summer camp experience in the county!**

**Camp is open from June 29<sup>th</sup> through August 7<sup>th</sup>**

**Planned thematic curriculum with daily scheduled athletics.**

**We have certified teachers on staff.**

**First Aid and Cpr Certified**

**Full and Half day options available.**

## **Camp Tuition**

<b>1 week:</b>	<b>\$285</b>
<b>6 weeks:</b>	<b>\$1620</b>

**Sibling discount available, \$25 off any sibling per week**

**Call now to secure your place and SAVE \$\$\$**

**Lunch can be purchased daily, catered by the Valley Cottage Deli.  
Snack bar, sports drinks, ice cream available for purchase**

**BEFORE AND AFTER CARE AVAILABLE**

**Call 914-772-6426**

**Visit our website at: [Cornerstonecamp.com](http://Cornerstonecamp.com)**

# Cornerstone Camp

**PLEASE ATTACH COPY OF UPDATED PHYSICAL FORM**

CHILD'S NAME (please print) first name: \_\_\_\_\_ last name \_\_\_\_\_

What grade will the camper enter in September? \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

Emergency Contact Name and Phone \_\_\_\_\_

Parent Cell Phone #1 \_\_\_\_\_ Parent Cell Phone #2 \_\_\_\_\_

Parent Email Address \_\_\_\_\_

Does your child have any food allergy requiring special attention? Yes \_\_\_\_\_ NO \_\_\_\_\_

Has your child ever been stung by a bee? Yes \_\_\_\_\_ NO \_\_\_\_\_

If YES to either, please explain: \_\_\_\_\_

Does your child have any other health concerns? Yes \_\_\_\_\_ No \_\_\_\_\_

If YES, please identify: \_\_\_\_\_

I hereby state that my child has my permission to participate in all camp activities which include physical activity. I authorize Cornerstone Camp staff to act for me in securing medical treatment for my child in the event of injury or illness.

\_\_\_\_\_ (initial)

Parent/ Guardian Signature: \_\_\_\_\_

Camp deposits will be put towards overall camp tuition. All balances are due upon the start of your child's enrollment to camp. ***No cash refunds will be given for any circumstances***, including injury, illness, or vacation time. Credit to a future camp week can be given. Multi-week discounts are only applied prior to the start of camp. I agree to allow photos to be taken of my son or daughter during camp activities for promotional purposes and those photos are property of the Cornerstone Camp.

**Send application and payment to:**

**Brian Metcalf, 335 Svahn Dr. Valley Cottage, NY 10989**

**Mark weeks and indicate either Full Day or Half Day. (FULL 9am-3pm) or (Half 9-12pm or 12-3pm)**

\_\_\_\_\_ June 29 – July 3 Full day/Half Day \_\_\_\_\_ July 20 – July 24 Full Day/Half Day

\_\_\_\_\_ July 6 – July 10 Full Day/Half Day \_\_\_\_\_ July 27 – July 31 Full Day/Half Day

\_\_\_\_\_ July 13 – July 17 Full Day/Half Day \_\_\_\_\_ August 3 – August 7 Full Day/Half Day

**Lunch is available to order daily from the Valley Cottage Deli.**

**Snacks, water, sports drinks available for purchase during the day.**