

ELIGIBILITY: Port Chester Recreation Dept. Summer Day Camp is open to any child who has completed Kindergarten and is not older than age 12. Resident fees stated below apply to children who live in Port Chester. Space is limited and applications will be taken on a first come, first served basis. A maximum of 150 campers will be allowed per session.

CAMP SESSIONS: **NEW******

FIRST COME FIRST SERVED

Session 1 – Mon. July 3rd – Fri. July 21st

(no camp 7/4)

Session 2 - Mon. July 24th - Fri. August 11th

Full Session –Mon. July 3rd –Fri. August 11th

HOURS:

8:30 A.M. - 9:00 A.M. - Drop-Off

9:00 A.M. - 3:30 P.M. - Activity Day

3:30 P.M. - 4:00 P.M. - Pick-Up

An additional fee will be charged for late pick-up

LOCATION: King Street School

TRANSPORTATION:

Parents must provide transportation for children to and from camp.

LUNCH: Campers bring their own lunch unless otherwise notified. Lunches are refrigerated.

Early Registration: - Prior to May 28th

6-Week Fee For Single Camper - \$600.00

3-Week Fee For Single Camper- \$300.00

Family Discount:

2nd Child - \$270.00 (Per Session)

3rd Child - \$240.00 (Per Session)

Non-Residents - 3-Week Session - \$325.00

A deposit of \$100 is required at this time with full session payment made by June 21st

Registration Fees After May 28th

1st Child - (Per Session) - \$310

2nd Child - (Per Session) - \$280

3rd Child - (Per Session) - \$250

Non-Resident (Per Session) - \$335

Future sessions cannot be guaranteed without prior registration and payment. **Absolutely no registrations will be accepted on the first day of camp.** Checks are to be made payable to: **Port Chester Recreation Dept.**

Parent Notes

Please have campers bring water bottle daily with names clearly printed

Camp Shirts must be worn on Trip and Pool days

Activities:

Camp day will include arts and crafts, swimming at Saxon Woods Pool(tentative), sports, games and entertainment.

Special Trips:

These may include such places as Dorney Park, Castle Fun Center, and other exciting trips.

NOTE: An additional fee will be charged for trips

CAMP NIGHT

TBD-King Street School

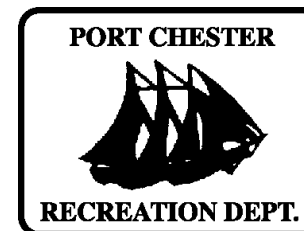
Parents have a chance to discuss Camp Program.

On-line registration coming soon!!

<https://secure.rec1.com/NY/port-chester-ny-/catalog> for instruction on how to start.

Please make sure you have provided update email address; correspondence for camp will be via email.

Visit <https://www.portchesterny.gov/recreation> for Recreation updates



RECREATION STAFF

Heather Krakowski, Rec. Superintendent

Teresa Sandoval, Office Assistant



Village of Port Chester Officials

Luis Marino, Mayor

John Allen, Trustee

Juliana Alzate, Trustee

Joseph Carvin, Trustee

Bart Didden, Trustee

Philip Dorazio, Trustee

Joan Grangenois -Thomas, Trustee

Recreation Commission Park Commission

Kim Morabito, Chr.

Concettina Thalheimer,Chr.

Carlo Cairo

Virginia Corbia

Mickey DeCarlo

Jody Helmle

Frank Errigo

Nicole Hollwedel

Janice Kunicki

Scott Ladore

Angelo Rubino

Gary Sullivan

Lynn Shields

Karen Provenzano

Mireya Vernon

*"PLAY is essential for life.
It is not selective it is
mandatory."
Dr. O. Carl Smith*

**PORT CHESTER RECREATION DEPT.
SUMMER DAY CAMP APPLICATION FORM**

PLEASE PRINT

Child's Name _____

Address _____

Home Phone _____ Gender M F

Parent's Name _____ Parent's Name _____

Parent's Cell Number _____ Parent's Cell Number _____

Grade in September _____ Email _____

Child's Age (as of June 30, 2023) _____ Child's D.O.B. _____

Emergency Contact Name _____

Emergency Phone Number _____

Physician Name Physician Phone Number _____

Any Medical Problem/Limitation? _____

Please *circle* EACH Session/Sessions attending:

Session 1(7/3 – 7/21)

Session 2 (7/24 -8/11)

(No camp -7/4)

Full 6 weeks (7/3 – 8/11)

Please Make Checks Payable and Mail To:
PORT CHESTER RECREATION DEPT.
222 Grace Church Street, Port Chester, NY 10573

PLEASE SUBMIT A RECENT SMALL PHOTO OF YOUR CHILD WITH YOUR APPLICATION

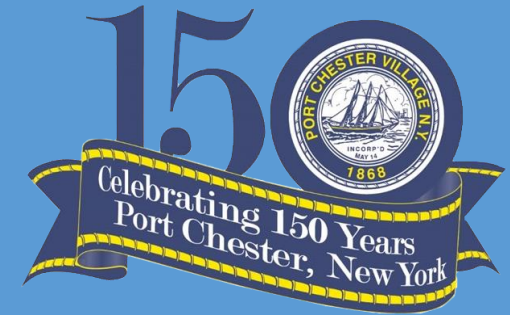
NO CAMP APPLICATION WILL BE ACCEPTED WITHOUT AN IMMUNIZATION RECORD

IMMUINZATION RECORD MUST INCLUDE HEPATITIS B (Hep B) 3 doses HAEMOPHILUS INFLUENZA TYPE B (Hib) and VARICELLA (Chicken Pox) and Measles(MMR)

All Applications Must Be Received by June 21, 2023

I agree that I hold the Village of Port Chester Recreation Department, the Village of Port Chester, and each of its officers, members, employees and agents blameless for injury sustained by my child, however caused, in the course of the Day Camp as described above, and I agree that neither I nor anyone on my behalf or my child's behalf shall prosecute any claim or course of action against the Village of Port Chester, the Recreation Department or any of its officers, members, employees or agents because of any such injury, however caused. I understand that the Village of Port Chester does not carry accident insurance. I hereby give permission for my child to participate in the Port Chester Recreation Department Day Camp. I have informed the Port Chester Recreation Department of any physical restrictions or limitations which my child may have. In the event of accident or illness, I give my permission for my child to receive medical treatment.

Parent's Signature _____ Date _____



**Port Chester
Recreation
Department**

SUMMER DAY CAMP

at

King Street School

Monday, July 3, 2023 through
Friday, August 11, 2023
(No Camp 7/4)

Port Chester Recreation Dept.
222 Grace Church Street
Port Chester, NY 10573

Phone: 939-2354
Fax: (914) 937-3169

www.portchesterny.gov
Instagram @pcrec10573