

Windber Recreation Park - Summer Camp 2025

Application and Agreement Form

Child's Name (List Siblings on Separate form): _____

Parent's/Legal Guardians Name: _____

Home Address: _____

Date of Birth: _____ Email: _____

Primary Phone # _____ Father's Cell# _____ Mother's Cell # _____

Allergies: _____

Special Accommodations: _____

Anticipated drop off and pick up times during camp sessions: (Ex: M 8 am / 4pm)

M: _____ T: _____ W: _____ Th: _____ F: _____

The weekly fee for the 5-day summer camp Program is \$130.00 per week prepaid or single days at \$35.00 per day. Each additional sibling attending same 5 day week receives a discount rate of \$95.00 per week or \$30.00 per day per sibling.

These are flat fees applied to each weekly session. **No refunds or credits for unused days during paid week.**

Summer Camp hours are 7:15 am to 5:30 pm Monday through Friday. Pick-ups after 5:30pm will be assessed a late fee of \$5.00 per half-hour.

Summer Camp Registration

Please indicate the weeks requested for summer camp. After 5/27/25, registration should be arranged one week in advance of the requested camp session. Payments must be made by the **WEDNESDAY** prior to camp session week.

Make checks payable to **Windber Municipal Authority**. Payment may be sent to the WMA Office at 1605

Graham Avenue, Windber, PA 15963. Phone: (814) 467-6696. Payment can be made in person Mon- Fri,

9:00 am to 3:00pm at the Community Building Front Desk. There is a mail slot on Recreation Directors door if no one is available.

Payments will not be accepted by counselors at the Windber Recreation Park

Note: \$35.00 penalty fee will be applied to any returned checks.

1.	{ }	Summer Welcome Week	6/9 - 6/13	\$130.00/\$95.00 (Sibling)	\$ _____
2.	{ }	Art Week	6/16 - 6/20	\$130.00/\$95.00 (Sibling)	\$ _____
3.	{ }	Careers Week	6/23 - 6/27	\$130.00/\$95.00 (Sibling)	\$ _____
4.	{ }	4 th of July Week	6/30 - 7/3	\$130.00/\$95.00 (Sibling)	\$ _____
5.	{ }	Olympic Week	7/6 - 7/10	\$130.00/\$95.00 (Sibling)	\$ _____
6.	{ }	Game Show Week	7/14 - 7/18	\$130.00/\$95.00 (Sibling)	\$ _____
7.	{ }	Have a Ball Week	7/21 - 7/25	\$130.00/\$95.00 (Sibling)	\$ _____
8.	{ }	Rock N Roll Week	7/28 - 8/1	\$130.00/\$95.00 (Sibling)	\$ _____
9.	{ }	Wacky Science Week	8/4 - 8/8	\$130.00/\$95.00 (Sibling)	\$ _____
10.	{ }	Summer Send-Off Week	8/11 - 8/15	\$130.00/\$95.00 (Sibling)	\$ _____

Amount Enclosed \$ _____

Total Camp Fees \$ _____

Fees cover camp costs, supplies, and snacks. This is a day camp. The summer camp hours are **7:15 am to 5:30pm**, Monday through Friday, Parents/Guardians provide transportation to and from the Recreation Park. Breakfast and one mid-day snack are included in the fees. Parents are to provide daily lunch meals. Space in Summer Day Camp cannot be guaranteed without payment. I have read and understand the terms of this agreement;

Signature: _____ Date _____

Printed Name of Signature/Relationship to Child: _____