





# Oak Hill Academy

## Summer Programs 2024

\*Use the below form to **select all** of the Oak Hill Academy Summer Programs you would like to REGISTER for, and submit it to the office by **May 17, 2024**.

**Please refer to the "Summer Program" page for details on each program and the session time schedule for each week.**

	<b>Session \$ Total</b>
<p><b>Session 1 – 8:30-10:00 am:</b></p> <p> <input type="checkbox"/> <u>Let's Play!</u> \$225 (grd. 1-3)               <input type="checkbox"/> <u>Tennis Camp</u> \$300 (grd. 2-8)               <input type="checkbox"/> <u>"The Wizard of Oz" Musical Production</u> \$375 <b>(8:30 am -11:30 am)</b> (grd. 3-9)         </p> <p> <input type="checkbox"/> <u>Baseball Camp-Session 1</u> \$300(grd. 5-8)               <input type="checkbox"/> <u>Summer Painting Camp</u> \$275 (grd. 1-8)               <input type="checkbox"/> <u>Jewels &amp; Gems</u> \$300 (grd. 1-8)         </p>	\$
<p><b>Session 2 –10:00 – 11:30 am:</b></p> <p> <input type="checkbox"/> <u>Baseball Camp-Session 2</u> \$300 (grd. 1-4)               <input type="checkbox"/> <u>Brainiacs</u> \$275 (grd. 5-8)               <input type="checkbox"/> <u>Cheer Camp</u> \$300 (grd. 5-8)         </p> <p> <input type="checkbox"/> <u>Nature Camp</u> \$250 (grd. 1-4)               <input type="checkbox"/> <u>Open Arts Studio</u> \$275 (grd. 1-8)         </p>	\$
<p> <input type="checkbox"/> <b>Check enclosed payable to: "<u>Oak Hill Academy</u>" OR</b>  <input type="checkbox"/> <b><u>Payment made on-line</u> on _____ (date)</b>            (scan the code on the right to pay on-line)         </p>	<div style="text-align: center;">  </div> <p><b><u>Total</u></b></p> <p>\$</p>

Name of Camper: \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Number: \_\_\_\_\_

Grade in September '24: \_\_\_\_\_ Birth date (MM-DD-YYYY): \_\_\_\_\_

Allergies: \_\_\_\_\_ Medications: \_\_\_\_\_

Camper's Doctor \_\_\_\_\_ Phone # \_\_\_\_\_

I certify that the above camper is in good physical condition and may take part in OAK HILL ACADEMY'S SUMMER PROGRAMS. I also hereby authorize the Oak Hill Academy Summer program staff to act for me according to their best judgment in any emergency requiring medical attention.

Parent / Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

***If you have any questions, please contact the director of the particular summer program.***

**Refund Policy:**

We will be following the NJDOH guidelines for all programs, and they will be limited in the number of participants. Students will be accepted on a first come first serve basis. Oak Hill Academy reserves the right to cancel a summer camp/course if enrollment minimums are not met, in which case a full refund will be issued. There will be No program refunds to students who cancel or withdraw after May 31 for any reason. In addition, no refund of any kind will be made for any interruption in the program due to illness, family vacation, transportation delays, weather related issues, power outages or external circumstances.