

CABIN JOHN/BROOKMONT CHILDRENS' PROGRAM, INC.

2026 SUMMER CAMP

4000 Virginia Place • Bethesda, MD 20816 • (301) 320-6780

CHILD'S NAME _____ DATE OF BIRTH _____
ADDRESS _____

PARENT INFORMATION

PARENT _____	PARENT _____
EMPLOYER _____	EMPLOYER _____
BUS.PHONE _____	BUS. PHONE _____
CELL PHONE _____	CELL PHONE _____
EMAIL _____	EMAIL _____

2026 SUMMER CAMP REGISTRATION

for children ages 2 to 5 yrs

Themes/Dates:

World Travel: Wk 1: June 15-19 Wk 2: June 22-26 Wk 3: Jun 29-Jul 2 (4 days)

Camping Adventure: Wk 4: Jul 6-10 Wk 5: July 13-17 Wk 6: July 20-24

Lions & Tigers & Bears: Wk 7: Jul 27-31 Wk 8: Aug 3-7 Wk 9: Aug 10-14

Hours: 9:00AM to 12:30PM, Monday through Friday

Tuition: \$225/week per camper for single weeks

Multi week discount: \$200/week for 4+ weeks, \$180/week for 7+ weeks

Extended Day Tuition: 12:30-3:30PM Monday-Friday \$200/week or \$50/day (advance registration required; drop-in will only be available if space is available).

Enrollment is limited to 12 campers, filled on a first come basis. A deposit of \$200/camper is due at signup, and is refundable only if your child's space is filled from our wait list of campers. Full tuition is due by June 1st.

REGISTRATION:

Camper's Name: _____ **Bday:** _____

Specify Camp Week(s): _____

Deposit Amount (payable to CJBCP, Inc.): _____

PERSON(S) AUTHORIZED TO PICK UP DAILY:

GENERAL RELEASE OF LIABILITY AND PARTICIPATION AGREEMENT

I hereby release CJBCP, Inc., its directors, and employees from any claims for unintended or unavoidable injuries, damages, or losses that may arise from my child's participation in program activities. I give permission for my child to participate in the programs above, including walks and activities within the community.

PARENT/GUARDIAN

SIGNATURE: _____ DATE: _____

(Please complete emergency information on reverse side. Thank you.)

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SUMMER CAMP**

CAMP AND EMERGENCY INFORMATION

Camp List for the summer adventures:

- Sunblock should be applied at home prior to arrival at camp
- Appropriate dress for being outdoors and getting dirty
- Shoes that can get wet (or an extra pair of shoes)
- An extra set of clothing
- A hat is recommended
- A filled water bottle labeled with your child's name (we can refill during the day)
- Lunch (refrigeration and microwave is available, unless special notice is given)
- A swimsuit and towel will be requested for days with water activities

EMERGENCY AND HEALTH INFORMATION

EMERGENCY CONTACTS (if parents cannot be reached)

CONTACT PERSON(S): _____ RELATIONSHIP: _____

ADDRESS: _____

TELEPHONE: HOME _____ WORK: _____

CONTACT PERSON(S): _____ RELATIONSHIP: _____

ADDRESS: _____

TELEPHONE: HOME _____ WORK: _____

PERTINENT MEDICAL INFORMATION

Pediatrician Name: _____

Telephone: _____

Current Medications: _____

Please list any medical conditions that may limit participation in activities:

ALLERGIES:

FOOD: _____

INSECT: _____

OTHER: _____
