HOLIDAY HILL YOUNGER DIVISION 2017 UP-TO-NIGHT PERMISSION SLIP

Holiday Hill invites all Younger Division campers (Bluebirds, Larks, Cardinals, and Orioles) to a fun-filled UP-TO-NIGHT!!

What is an Up-To-Night? Up-To-Nights give campers of the Younger Division the opportunity to participate in an after-camp program at which they play games, swim, have an evening meal (Hot Dogs, Veggies, Dip, Crackers), and conclude the event with a campfire program and snack (classic s'mores).

Up-To-Nights take place on the second Tuesday of each session. They begin at the end of the camp day and last until 8:00 P.M. This is an "extra-campicular" activity with a fee of \$25.00

Campers may need to bring a sweatshirt or light jacket in case of a cool evening. Bug repellent (non-spray applicators, please) may also be a good idea.

If your child wishes to participate, please return the tear sheet and fee as soon as you can!!

PICK UP PROCEDURES

Our program ends AT 8:00 pm. Please remain at the basketball court until your children are brought to you for departure. As we end with a campfire, parents' sporadic arrival, and then departure with children takes away from the closure experience. In order for our scheduled program to be successful, we ask that you please respect our pick up procedures. Please feel free to browse our camp store while waiting for your camper. The camp store will open at 7:30 pm.

	Х	Session	Date	
		First Session	Thursday, July 6	
		Second Session	Tuesday, July 18	
		Third Session	Tuesday, August 1	
		Fourth Session	Tuesday, August 15	
Camper's Name:			Group:	Bus/Van:
Group (Circle One):	BLUEBIRDS	LARKS		ORIOLES
Connecticut Stat authorization for prepared contain	any evening me e Law and Regulation approved camp he ners and labeled wi tist's name, and da	dications? ons require a physicia alth personnel to adr th the name of the c te of original prescri	Describe: (yes/no) If so, please come of the drug, strength, ption. Call the camp in advance in the http://www.holidayrecreation.com	parent or guardian's s must be in pharmacy dosage, frequency, f you need an

my permission for the child named above to participate. I

will arrange for my child to be picked up promptly at 8:00

P.M. following the event.

(Signature of Parent or guardian)

(Printed Name of Parent or Guardian)

Payment Method (please check one):

Cash (enclosed)

Card #

Exp. Date _____

Check #

Credit Card

Up to Night Fee: \$25.00

(enclosed)