



DSFC SUMMER CAMP

Active Body, Active Mind

Dear Neighbors & Friends:

Thank you for your interest in our Summer Camp Program at Delaware Swim & Fitness Pike Creek. We are very excited to share our programs with area youth this summer.

We are partnering with the Delaware Swim School to bring your child an unforgettable, active, summer! Children will enjoy swimming in our indoor pool, playing basketball, dance, crafts, outdoor play, special guests and more fun activities to keep them moving.

Campers can choose from full or half day schedules, or just attend for one day at a time. Before and after care are also available and siblings receive a 10% discount. DSFC Summer Camp is best suited for campers 5 - 13 years of age. Full Day campers will be provided snack every afternoon at no additional charge.

Register today by completing the attached registration and payment form and return via email to christydsfc@gmail.com or mail to DSFC. Camp Program, 4905 Mermaid Blvd., Wilmington, DE 19808. We will then reach out to confirm your registration and send more information about our program.

Best,

Christy Krezel



Sessions:

- June 24 – June 28
- July 8 – July 12
- July 15 – July 19
- July 22 – July 26
- August 5 – August 9
- August 12 – August 16

Weekly Rates:

- Half Day (9a–12p) \$149
- Full Day (9a–3p) \$199
- Single Day Rate \$45

Date(s): _____

Extended Day:

- Before Care (8a–9a)
\$10/day or \$35/week
- After Care (3p–5p)
\$15/day or \$50/week

Is a sibling also registered? YES NO

Name: _____



SUMMER CAMP REGISTRATION

Child's Name: _____

Parent/Guardian: _____

Address: _____

Home Phone: _____

Mobile Phone: _____

Email: _____

Would you like text updates about camp? YES NO

Child's date of birth: _____ Age: _____

Does your child have allergies? YES NO

Please specify:

Does your child require medication? YES NO

Who make pick-up your child?

1. _____

2. _____

EMERGENCY CONTACTS:

Name: _____

Phone: _____

Name: _____

Phone: _____



SUMMER CAMP PAYMENT SLIP



Child's Name: _____

Camp Fees:

Full Day : _____ x \$199 = \$ _____
of Sessions

Half Day : _____ x \$149 = \$ _____
of Sessions

Daily Camp : _____ x \$45 = \$ _____
of Days

Extended Day Services:

Before Care

\$10/ day x _____ days = \$ _____ OR

\$35/ session x _____ sessions = \$ _____

After Care

\$15/ day x _____ days = \$ _____ OR

\$50/ session x _____ sessions = \$ _____

Total Due: \$ _____

Please enclose check payable to :

Delaware Swim and Fitness Center

or complete credit card payment info below:

Card #: _____

Exp: _____ CVV: _____

Signature: _____

Please return completed
registration and payment forms
via email or postal mail.

Christydsfc@gmail.com

or

Delaware Swim & Fitness Center
Camp Program
4905 Mermaid Blvd
Wilmington, DE 19808
302-234-8500

