

Dan Cosgrove Animal Shelter  
Animal Camp Form: 2017

Child's First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ Town/Zip: \_\_\_\_\_

State: \_\_\_\_\_

Gender: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_/\_\_\_/\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Parent/Guardian First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Work Phone Number: \_\_\_\_\_

Please indicate which week or weeks your child will be attending:

\_\_\_\_\_ June 19-23<sup>rd</sup>                      \_\_\_\_\_ July 17<sup>th</sup>-21<sup>st</sup>                      \_\_\_\_\_ August 14<sup>th</sup>-18<sup>th</sup>

\_\_\_\_\_ June 26<sup>th</sup>-30<sup>th</sup>                      \_\_\_\_\_ July 24<sup>th</sup>-28<sup>th</sup>                      \_\_\_\_\_ August 21<sup>st</sup>-25<sup>th</sup>

The cost for camp is \$140 per child per session with an additional \$5 off for a second child sibling registered at the same time. Early Registration is any time before April 1<sup>st</sup> and there will be an additional \$5 deduction if a child is registered by April 1<sup>st</sup>.

**\*\*\*Children will not be considered registered until a payment has been received in full\*\*\***

Accepted payments: Cash Check PayPal

Paypal can be completed at [www.branfordanimalshelter.org](http://www.branfordanimalshelter.org) Please click on Donate and follow the steps from there.

**\*If paying by PayPal, please make a note indicating it is for Animal Camp in the special instructions option.\***

Please mail check payments to Dan Cosgrove Animal Shelter 749 East Main St. Branford, CT 06405 Attn: Animal Camp \* Please include both your registration form and medical form with you check.

Cash payments will only be accepted at the shelter at the time you bring and complete your registration and medical form.

Please check all that apply:

I have paid in full by cash, check, or PayPal.

I understand that my child will not be registered until I have paid in full.

I understand there is a \$10 fee due immediately upon pick up for every 15 minutes after pick up time at 3:00 p.m.

Please bring this registration form to the Dan Cosgrove Animal Shelter office or email it to [dbuffone@branford-ct.gov](mailto:dbuffone@branford-ct.gov).

By signing this form, the parent(s)/ guardian(s) and your child agree that you have read all the rules and regulations governing the Dan Cosgrove Animal Shelter Animal Camp and that all information is correct and that you will abide by all the rules set forth.

Parent/Guardian Signature: \_\_\_\_\_ Please print your name: \_\_\_\_\_

Date: \_\_\_\_\_