

School Break Camp

The Creative Campus School Break Camp follows the local school district calendar and is offered when public schools are closed. Children may participate in daily creative enrichment opportunities and much more!

Full Day: 7:00a.m.-6:00p.m. \$65 per day Sibling Discount: \$55.00

Friday, October 3rd

Thursday, October 2nd

Branchburg District and Bridgewater Raritan District

Movie: Hotel Transylvania 3 (Netflix-PG)
Craft: Paper Bag Halloween Cats
Food Project: Frankenstein Pudding Cups

(Jello Pudding, Cool Whip, Gel Food Coloring, Crushed Oreo's)



Branchburg District ONLY

Pizza Party for Lunch \$2.00 for a slice of pizza (additional slices \$1.00 each) (Pizza From Vinnie's Pizza and Pasta in Branchburg) Crafts: Construction Paper Candy Corn and Tissue Paper Googly Eye Pumpkins



Campers will be able to use our new school aged playground and Gaga Pit.

Please send a lunch, a morning and afternoon snack and a watter bottle all labeled.

Campers must wear sneakers

Minimal enrollment needs to be met to run the program.

In addition to our scheduled activites, campers will have the opporunity for classroom activites, board games, gymnasium play, and outdoor play.

Registration is due by 9/30

For more information call 908-722-1563 Email Jeanine Alpizar at jalpizar@jointure.org and Pete Diana at pdiana@jointure.org

(Children with lifesaving medication must provide an Action Plan, Permission Form and Medication)
Peanut Free School Building

**PLEASE NOTE: THE CREATIVE CAMPUS SCHOOL BREAK CAMPS ARE OPEN TO THE PUBLIC.
ALL CHILDREN, REGISTERED JOINTURE FAMILIES AND NON-REGISTERED FAMILIES ARE WELCOME TO ATTEND! **

The Creative Campus 500 US HWY 22 Bridgewater, NJ 08807 jointure.org 908-722-1563

The Creative Campus School Break Camp Registration

Child's Name	Grade:
☐ Male ☐ Female BirthdateSchool_	
Mother/Guardian	Work #
Address	Cell #
Town/Zip	Home #
Business Name	E-Mail Address
Father/Guardian	Work #
Address	Cell #
Town/Zip	Home #
Business Name	E-Mail Address
Please select the days you would like yo	ur child to attend:
	Exp. Date:
Cardholders Name: A 3% Credit/ Debit Card fee will be applied to any charge	
_	ation must provide an Action Plan, Permission Form and medication) ne physicians selected, in an emergency, take whatever action is deemed necessary
visitation, shared custody orders, restraining order, et	ould prevent your child from participating in our program (i.e. weekend parent c.)?
incident to participation in all Jointure activities. I further waive, re officers, directors, participants, coaches, referees, as well as, person child's participation in Jointure programs.	n consideration for my child's participation in Jointure programs, I hereby assume all risks and hazards lease, absolve, indemnify and agree to hold harmless the Jointure, the organizers, volunteers, supervisors, is or parents transporting participants to and from activities from any claims or injury sustained during my /ER, RELEASE, INDEMNIFICATION AND HOLD HARMLESS AGREEMENT
Thease check the boxes that you give permis:	SIGITIOI.
O Photo O Video O Website O Faceboo	ok O Instagram
Signature of Parent or Guardian	Date