

Essex County College
West Essex Campus
730 Bloomfield Avenue · West Caldwell, NJ 07006
Office: (973) 877-1920 · Fax: (973) 877-6635
Summer Program for Kids 20_____
Fax: Mail: Phone: In Person:

Youth Name: _____

Address: _____ **Apt.#** _____

City: _____ **State:** _____ **Zip:** _____

Parent/Guardian Name: _____ **Phone Number:** _____
 () _____

Emergency Contact Name: _____ **Phone Number:** _____
 () _____

COURSE SELECTIONS **One T-Shirt included**
- Select Size

Period 1	<input type="checkbox"/> Small
Period 2	<input type="checkbox"/> Medium
Period 3	<input type="checkbox"/> Large
Period 4	<input type="checkbox"/> X Large
	<input type="checkbox"/> XX Large

PAYMENT METHOD

Cash Visa MasterCard Discover Money Order Check

Credit Card/Check M.O. # _____ **Exp.** _____

Name on Credit Card/Check _____

Parent/Guardian Signature **Staff Initials** **Date**

Make Check or money order payable to Essex County College and mail to: Essex County College, Cont. Education & Community Services, 730 Bloomfield Avenue, West Caldwell, NJ 07006.	Tuition Fee:	\$
	Other:	\$
	Total:	\$

Registration by mail, or fax only, should be confirmed by calling (973) 877-1920