



CAMP ICONIC & WEE FRIENDS 2025 FALL APPLICATION

2025 Season: June 30th – August 20th

Circle Program of Your Choice

NEW – Wee Friends Camper Program

Ages 2 – 4 (pre-K)

Mon. – Fri. 9:30 – 4:00 (full day) - **\$4150.**

Mon. – Fri. 9:30 – 1:30 (mini day) - **\$3175.**

Lunch and Daily Snack Included

Camper Program

Grades K – 8

Mon. – Fri. 9:30 - 4:00

\$4750.

Lunch and Daily Snack Included

ENTERING KINDERGARTEN PROMO - \$4450.

Camper Worker Program

Grade 8

Mon. – Fri. 9:30 – 4:00

\$3050.

Lunch and Daily snack included

LIMITED ENROLLMENT

Help out with younger campers periods 1-6, then enjoy periods 7-9 with your peers

CIT Program

Mon. – Fri. 9:30 - 4:00

Grades 9 & 10

\$1595.

Lunch and Daily Snack Included

LIMITED ENROLLMENT

Extended hours available upon request 8:30 – 9:30 and/or 4:00 – 5:00

Please check here for: early drop off ____ late pick up ____

ADDITIONAL FEES WILL BE APPLIED

Office Use Only Below this Line

Tuition: _____

2600 Regent Place * Bellmore, New York 11710 * 516-781-8800* www.campiconic.com
From Wee Friends to Camp Iconic- We Take You Full Circle!

DATE: _____

Please fill out this application and return with your registration fee of \$200.00.

Tuition payment is due by May 1st.

Boy () Girl () Birthdate _____

Age or Grade as of Sept. 2025 _____

LAST NAME FIRST NAME HOME PHONE

ADDRESS TOWN ZIP CODE

NAME/PARENT #1 OCCUPATION BUSINESS ADDRESS PHONE

NAME/PARENT #2 OCCUPATION BUSINESS ADDRESS PHONE

email contact _____

HOME CONTACT INFORMATION

EMERGENCY CONTACTS (NAMES AND TELEPHONES)

1. PARENT #1 CELL _____ PARENT #2 CELL _____
2. _____
3. _____

PHYSICIAN TO BE CALLED IN EMERGENCY _____

ADDRESS _____ **PHONE NUMBER** _____

TO BE COMPLETED BY PARENT

1. Has your child had any illness, injury, or operation? YES () NO ()

Specify dates of above _____

2. Does your child have any allergies? YES () NO ()

***Specify _____

3. Does your child take any medication on a regular basis? YES () NO ()

***Specify _____

ENROLLMENT AGREEMENT WHEN REGISTERED IT IS AGREED:

1. That the charges for the period are: _____.
2. Enclosed with this agreement is a \$200.00 non-refundable registration fee. Payments on account for tuition (excluding the \$200.00 registration fee) will be refunded through April 1, 2025. Thereafter, no refund will be made.
3. Any outstanding balance precludes admission to school/camp.
4. It is understood that Wee Friends Nursery School, Inc. reserves the right to terminate this agreement at any time because of default of payment or for any reason.
5. We grant permission for our child to be taken on field trips without further consent.
6. The Wee Friends Nursery School, Inc. may use photographs, statements, names, films, videos, tapes, of/by students.
7. The seasonal nature of summer programs precludes any tuition rebate/ reduction/ allowance for camper's late arrival/ early withdrawal/ non-arrival/dismissal of cause.
8. In case of emergency, when our family physician cannot be reached, we grant our permission to Wee Friends Nursery School, Inc. to provide medical attention for our child.
9. If a fuel, energy tax, or tax of such nature is imposed by the Federal, State or local government Wee Friends reserves the right to adjust tuition accordingly.

(2025 season: June 30th – August 20th)

Date _____ Parent's Signature _____ ISA