



2024

2045 Ocean Blvd., Atlantic Beach, NY 11509
516-239-2150 CatalinaBeachClub.com

Camp Catalina Registration Form

Please reserve a spot for my son/daughter _____

Parent Name _____ Facility Number _____

Parent Address _____

Phone: Home _____ Cell _____ Work _____

Email _____

Date of Birth _____ Age of child as of July 1st: Year _____ Month _____

Preschool experience: _____

Previous Camper? Yes _____ No _____

If so, Name of Group _____

Will your child be entering Kindergarten in the fall of 2024? YES _____ NO _____

Will your child be entering 1st grade in the fall of 2024? YES _____ NO _____

Help us to know your child. List strengths and weaknesses:

Does your child have any special needs? (List if applicable)

Please indicate if there is a friend your child would like to be with.

Catalina cannot guarantee that requests will be honored.

Catalina Beach Club has my permission to use any and all photos taken during the camp season for promotional purposes.

Parent/Guardian Signature