



2009 SHERIFF'S JR. SUMMER CAMP

SHERIFF JERRY SPEZIALE
CHIEF OF COMMUNITY POLICING
JAMES D'ERRICO



- This Form is to be filled out to **request** a spot in the 2009 summer camp.
- This Form **does not** guarantee placement in the camp program.
- This program is for Passaic County Residents only.**
- Please note to qualify your child must be between the ages of **10 to 13**
- Transportation might NOT be available.**

Name: _____

Date of Birth: _____ Age: _____

Address: _____

City: _____ Zip: _____

Parent/Guardian: _____

Phone: _____ E-mail: _____

School: _____ Grade: _____

If we cannot provide transportation would you still want your child to participate in the program- _____ Yes _____ No

- Check here if you have participated in the Jr. Academy in the past.**

Upon receipt of this form your child's name will be placed on a list to reserve a spot for the 2009 Jr. Summer Camp. In June of 2009 you will receive further information.

Please return this form to:

Passaic County Sheriff's Department
Community Policing Unit
C/o J. Walton
435 Hamburg Turnpike
Wayne, NJ 07470

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Please select the week you would like your child to attend.

- Week One August 17th to 21st 2009**

- Week Two August 24th to 28th 2009**

Please return this form with your application.