

Day Pass

Registration packet



Day Pass Camp Options and Information

Initial Camp paperwork will not be accepted without all required documentation:

Child's most recent Immunization Forms, Media Consent, Swim Waiver

Child must be an ACTIVE member of HealthQuest at the time of enrollment for Member Pricing

Registrations are subject to availability and processed on a first come first served basis.

If Accepted ALL Forms received after 12 pm Thursday the week prior to camp date needed will be charged a walk in/late fee of \$10/day or \$25/week.

Payment in full is due at registration.

NO DISCOUNTS APPLICABLE ON DAY PASSES.

No Refunds after registration and enrollment is processed

Day Pass enrollment can only be utilized for FULL day Camp (9-3pm)

NOT applicable for 1/2day camp

All 3 yr old campers MUST be FULLY potty trained to attend camp

Option Details / Descriptions



All Children ages 3-6yrs will be registered with Jr. Dyno Camp All Children ages 7-12 will be registered with Camp Dynomite

Specialty Camps CANNOT be selected for Day Pass as they are FULL week enrollment ONLY



Camp Day Pass 2025

If Accepted ALL Forms received after 12 pm Thursday the week prior to camp date needed will be charged a walk in/late fee of \$10/day or \$25/week.

Payment in full is due at registration. No refunds. NO DISCOUNTS APPLICABLE ON DAY PASSES. SUBJECT TO AVAILABILITY

Child's Name:		DOB:	Age: _	Sex: M F
Allergies/Special Needs:				
Pick Up Password:	Dietary	Restrictions:		
Parent/Guardian's Name:				
Phone: (w)	(h)		(c)	
Address:	City:		State:	Zip:
Email Address:				
Initial Registration	ase select: HQ Members (Child must be an active Members forms will NOT be accepted accepted as Per State Regule)	nber to receive M ted without a co	ember pricing) opy of your child	l's most recent
BC (Before 0	Please note (next to date(s) need Care) \$10 - AC (After Care) \$ Please List Dates Needed (S	ded) if you require t 20 - L (Lunch) \$1 SUBJECT TO AVAIL	the following: 3 - S (swim Lesson ABILITY):) \$25
	Total Balance Due: \$_			
I, the parent/guardian of the registrant, of Central Jersey, LLC., its affiliated orgafor HealthQuest of Central Jersey, LLC indemnify HealthQuest of Central Jerse associated personnel, including the own as a result of the registrant's actions. health/accident insurance secured indeto be transported for emergency medic or Doctor of Dentistry. This care may be a parent Signature	anization and sponsors. Recognizing anization and sponsors. Recognizing the registrant for its lead by, LLC., its officers, coaches, manageners of the fields and facilities utilized. I affirm that the registrant is in sependently. As parent/guardian or the cal care. I hereby authorize consent for given under whatever conditions	the possibility of physigue programs and acters, referees, its affiliated for the league program of the league program of the registrant, I hereby or emergency medical necessary to preserve	cal injury associated wit civities, I hereby release ted organizations and s am, against any claim be ealthy condition and the give my permission for care prescribed by a dualife, limb or well being	th leagues and in consideration e, discharge, and/or otherwise ponsors, their employees, and y or on behalf of the registrant nat the athlete is covered by the participant of the program ally licensed Doctor of Medicine of my dependent.
	Method of	f Payment		
	(PLEASE	•		
Cash	Credit Card	Member	Charge (CC on	File)
Account Number		E	xp Date:	CVV:
Signature:			_ Date:	



HealthQuest Camp Media Consent Form

I hereby give HealthQuest, its employees, and those acting with its authorization the right and permission to copyright, use, and/or publish my photographic images and/or quotes in promotional materials, which include press releases, videos, catalogs, magazines, brochures, information sheets, and the HealthQuest web site.

I hereby waive any right to inspect or approve the finished videos, photographs, advertising copy, or printed matter that may be used in conjunction therewith or to the eventual use that might be applied.

I hereby warrant that I am competent to contract in my own name insofar as the above is concerned.

A parent or guardian must sign the release if the individual photographed is under 18 years of age.

I have read the foregoing release, authorization, and agreement before affixing my signature below, and warrant that I fully understand the contents thereof.

I authorize HealthQuest to photograph my child as named below				
☐ I <u>DO NOT</u> authorize HealthQuest to photograph	my child as named below			
Participant's Name:				
Address:				
City:	Zip Code:			
Phone:	_			
Parent/Guardian Signature				

Thank you for allowing us to share your experience with others!

Camp Dynomite



INDOOR/OUTDOOR POOL - Waiver / Release of Liability

Copies of Swim Liability Waiver must be submitted to Aquatics Director, or HealthQuest representative overseeing the event.

All Swimmers must listen to a brief presentation by a HealthQuest Lifeguard regarding Pool/Slide Rules and Safety Procedures during first visit.

This is a release of liability and waiver of certain legal rights. I, ______

Please read carefully before signing.

including but not limited to paralyzing injuries and in the water activities and hereby agrees to indemr its coaches, instructors, directors, agents and empl that may occur to the participant(s) while participa	at there are risks inherent in the sport of swimming, death. The participant(s) hereby agrees to participate afty and hold harmless HealthQuest of Hunterdon LLC, oyees against any liability resulting from any injury ting in swim lessons, open swim, lap swimming, water st of Hunterdon LLC. The participant(s) also agrees to amages incurred arising from any claims, demand, participant(s) authorizes any representative of ant treated in any medical emergency during their LC. Further, the participant(s) and /or with medical care and transportation for the
SWIM LEVEL OF THE PARTICIPANT:	
Participants NAME:	AGE:
Beginner (Must be able to swim independer guardian must accompany the swimmer in	ntly with a floatation device on, if not, parent or the water.)
Intermediate (Must be able to pass a basic sequired)	swim test with Lifeguard, floatation device not
Advanced (If under the age of 13, must take	part in a basic swim test with Lifeguard)
I give my child permission to choose not to to go to the pool if this is not checked.	swim on any given day - your child will be required
Swim Test, prior to entering the water, to ensure the device. If floating device is deemed appropriate, "F	e "Participant" must see HealthQuest Lifeguard for a at they are able to navigate the pool free of floating Participant" must maintain floating device at all times immers remain in areas of the pool in which their feet pool. Advanced Swimmers should use their best
By signing, I indicate that I have, read, understa	and and accept the conditions of this document.
Emergency Contact Name:	Phone:
Signature:	Date:





2025 Camp Dynomite Lunch

Monday

Chicken Fingers, Mozzarella Sticks, Watermelon, Chips, Snacks, Juice

Tuesday

Pizza, Watermelon, Chips, Snacks, Juice

Wednesday

Choice of Chicken Burritos/Bowls/Tacos with Cheese/Black Beans/Rice, Watermelon, Chips, Snacks, Juice

Thursday

Pasta (Macaroni & Cheese, Buttered Noodles, Penne Vodka), Watermelon, Chips, Snacks, Juice

Friday

Pizza, Watermelon, Chips, Snacks, Juice, KONA ICE!!



Thank you for choosing HealthQuest, we look forward to seeing your children this summer!

Please submit all applicable Required (*) paperwork to the Program Desk

Required paperwork is only needed with initial enrollment

Camp Paperwork Checklist

	Day Pass Camp Worksheet		All Dates needed are noted
			Options needed are noted
			Password & allergy information completed
	HealthQuest Media Consent Form*		
	Swim Waiver*		
	Most Recent Immunizations* (Must acc	com	pany initial forms for enrollment to be accepted)
	Asthma Action Plan / EpiPen (if applicab	ole)	
,	Should you have additional questions o	ibot	ut specific items/camps please contact:
3-6 _\	yr Old Camp Dynomite		Stacy Reasoner reasoner@hqfit.com
7-12	2yr Camp Dynomite and Specialty Camp	S	Candace Bunnell
			<u>bunnell@hqfit.com</u>
Can	np Enrollment and Processing		Tracy StClair
			<u>programdesk@hqfit.com</u>



Camp Summer 2025 Camps at a Glance

Camp Dates	Spe	Jr & Dyno Camps see below for options				
JUNE 16-20		Jr & Camp Dyno ONLY	- No Specialty Camp			
JUNE 23-27	Drones & Rocketry 7-12 years	Science & Art 4-6 years	Girls Gymnastics 4-12 years	Princess Camp 4-7 years		
JUNE 30 - JULY 3	Jr & Camp [
JULY 7-11	Minibot & Battlebots Robotic Fun 6-12 years	Exploring with Robots 5-9 years	Cooking Camp 7-12 years		Jr Dyno 3-6 years Camp Options	Camp Dyno 7-12 years Camp Options Available all Summer Full Day Camp 9-3pm 1/2 Day AM Camp 9-12pm or 1/2 Day PM Camp 12-3pm
JULY 14-18	LEGO Building & Machines 6-12 years	Diggin for Dinos 4-6 years	Girls Gymnastics 4-12 years **12-3pm	Superhero 4-7 years		
JULY 21-25	Chemical Wizardry 6-12 years	Science Explorers 4-6 years	Baking Camp 7-12 years		Available all Summer	
JULY 28- AUG 1	Arts, Crafts & 3D Design 6-12 years	Young Engineers 4-6 years	Cooking Camp 7-12 years		Full Day Camp 9-3pm or	
AUG 4-8	Drones & Rocketry 7-12 years	Science & Art 4-6 years	Girls Gymnastics 4-12 years	Princess Camp 4-7 years	1/2 Day Camp 9-1pm	
AUG 11-15	Minibot & Battlebots Robotic Fun 6-12 years Exploring with Robots 5-9 years	Exploring with Robots	Girls Gymnastics 4-12 years	Baking Camp		
		Ninjastics 4-12 years	7-12 years			
AUG 18-22	LEGO Building & Machines 6-12 years	Diggin for Dinos 4-6 years	Cooking & Baking Camp 7-12 years			
AUG 25-29	Chemical Wizardry 6-12 years	Science Explorers 4-6 years	Princess Camp 4-7 years			

HealthQuest Fitness Club 310 Hwy 31 North - Flemington NJ camp@hqfit.com - 908-782-4009 ext 234 Camp Add On Options Include: Before Care (7:30-9am), Lunch, After Care (3-6pm) PM Extention for Specialty Camps (12-3pm)