

Fee \$ 35.00
Town of Chatham

Town of Chatham
Health Division
Department of Health and Environment
261 George Ryder Rd.
Chatham, MA 02633

Phone 508-945-5165
Fax 508-945-5163



**APPLICATION FOR A LICENSE TO CONDUCT A
RECREATIONAL CAMP FOR CHILDREN**

Name of Camp: _____
Site Address: _____
Site Telephone: _____

Name of Camp Owner: _____
Office Address: _____
Telephone Number: _____
Email: _____

Name of Camp Operator (if different): _____
Address: _____
Telephone Number: _____
Email: _____

Name of Health Care Consultant: _____
Address: _____
Telephone Number: _____

Type of Camp: Day Residential
Hours of Operation: _____
Dates of Operation: Opening: _____ Closing: _____

Swimming Pool: Yes Pool Permit Number _____ No

Bathing Beach: Yes No

Meals Provided: Yes Food Permit Number _____ No

Signature of Applicant: _____
Official Title: _____ Date: _____