



2009 SUMMER CAMP REGISTRATION FORM

Camper Name: _____ Age: _____ Sex: _____

Camper Name: _____ Age: _____ Sex: _____

Camper Name: _____ Age: _____ Sex: _____

Parent Name: _____

Phone #: _____ Email: _____

Title	Dates	Cost	Qty	Total
Session 1	6/1-6/5	\$125		
Session 2	6/8-6/12	\$125		
Session 3	6/15-6/19	\$125		
Session 4	6/22-6/26	\$125		
Session 5	7/13-7/17	\$125		
Session 6	7/20-7/24	\$125		
Session 7	7/27-7/31	\$125		
Session 8	8/3-8/7	\$125		
Late Pick-Up		\$10		
Early Drop Off		\$10		
Multi Camp Discount		-\$5		
Early Bird Discount (PRIOR TO 4/30)		-\$5		
Total				

T-shirt Size: _____ / _____ / _____

Food Allergies: _____ / _____ / _____

Credit Card # _____ Exp. Date: _____

Signature: _____ Date: _____