

ST. MARGARET'S SUMMER ARTS CAMP
A Multicultural Arts Program for Campers in Grades 4th – 8th
July 20-24, 2026
REGISTRATION FORM

Please mail to:
 Summer Arts Camp c/o St. Margaret's Episcopal Church
 5301 Free Pike, Trotwood, OH 45426

STUDENT INFORMATION:

Last Name	First Name	M.I.	Age	Grade Level	Male/Female (Circle One)
Street Address			City	State	Zip Code
Home Phone		Cell Phone		E-Mail	

PARENT/GUARDIAN INFORMATION:

Last Name	First Name	Relationship	Home Phone	Cell Phone
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Please enclose \$30.00 Materials Fee (no cash)
 Make Checks/Money Orders Payable to:
CCOD: Council for Community Outreach
 Development, Inc. c/o Summer Arts Camp



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Household Information

To better serve families with children who want to attend camp we kindly request the following information. The information is required for funding requests submitted to grantors who support the Arts Camp program. Your information will remain strictly confidential.

How many children (under 18) are in your household?

- 1
- 2
- 3
- 4 or more

How many adults (18+) are in your household?

- 1
- 2
- 3
- 4 or more

What is the race/ethnicity of your household?

- African American
- Asian/Pacific Islander
- Hispanic/Latino
- Native American
- White
- 2 or more races

What is your total annual household income?

- Less than \$25,000
- \$25,000 to \$49,999
- \$50,000 to \$74,999
- \$75,000 to \$99,999
- \$100,000 or more

Signature: _____
(Parent/Guardian)

Date: _____