

SUMMER CAMP 2020

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|-----------------|-----|---|---|
| Student's Name: | DOB | / | / |
| | | | |
| | | | |
| Parent's Name: | | | |
| Address: | | | |
| | | | |
| Telephone Cell: | | | |
| Home: | | | |
| Work: | | | |
| Emergency: | | | |
| Email: | | | |

CAMP: _____

Check off which weeks you are signing up for
\$160.00 a week for 2-hour camps
\$320.00 a week for 4-hour camps

_____ July 6th
_____ July 13th
_____ July 20th
_____ July 27th

_____ Aug 3rd
_____ Aug 10th
_____ Aug 17th
_____ Aug 24th