



Summer camp July. 4 –Sept 2

July

Full name:
Contact phone:

Emergency phone:

Mark boxes to indicate choice

Camp Fees:
(Indicate choices as shown)

29
X

Camp Full Day: **\$70** (9am-4pm)

29

Half day: **\$45** (9am-12pm)

4	5	6	7	8	1
11	12	13	14	15	2
18	19	20	21	22	3
25	26	27	28	29	4

AUGUST-SEPT.

1	2	3	4	5	5
8	9	10	11	12	6
15	16	17	18	19	7
22	23	24	25	26	8
29	30	31	1	2	9

Camp 1 day - \$70

Camp 1 week (5 day) - \$320

All prices do not include taxes

No makeup lessons for camp sessions

*Non-refundable deposit of
\$100.00 for each submitted application*

Please indicate any pre-existing medical conditions (allergy, asthma, bad ankles, bad back, etc.)

Signature _____ Date _____