

Sport's Camp Sign Up

Child Name: _____ Date of Birth: _____ Grade: _____

Child Name: _____ Date of Birth: _____ Grade: _____

Child Name: _____ Date of Birth: _____ Grade: _____

Parent/Guardian: _____ Phone: _____

Address: _____

Emergency Contact: _____ Phone: _____

Allergies: _____

Medical Conditions: _____

Camp Selection

- June 12-16
 - 9:00 AM to 12:00 PM (\$50)
 - 9:00 AM to 3:00 PM (\$100)
 - 9:00 AM to 5:00 PM (\$125)
- June 19-23
 - 9:00 AM to 12:00 PM (\$50)
 - 9:00 AM to 3:00 PM (\$100)
 - 9:00 AM to 5:00 PM (\$125)
- June 26-30
 - 9:00 AM to 12:00 PM (\$50)
 - 9:00 AM to 3:00 PM (\$100)
 - 9:00 AM to 5:00 PM (\$125)

(Possible 4th Week July 10-14 if there's enough interest)

Total Due: _____

*Please make checks payable to: Patrick Aument

*All Camp Participants must have a current Medical Information Card on file to participate. Medical Information Cards can be obtained through the school office or can be found online.