

SUMMER 2025 Rising 4th-7th Grades: Monday-Friday,1pm-4pm

| Check off each week you'd | like to register for: |
|---------------------------|---------------------------------|
| July 21st through 25th | □ July 28th through August 1st |
| August 4th through 8th | August 11th through August 15th |

| Name of Camper: | Cell #: |
|--|---------------|
| Age/Grade this coming fall: | |
| Name of Parent: | Cell #: |
| Name of Parent: | Cell #: |
| Parent's Email: | |
| Home address: | Home phone #: |
| Emergency Contact info: | |
| Medical Conditions: | Allergies: |
| Medications: | |
| Permission to use photos: YES NO | |
| Parent's signature | |
| Please email your completed forms to ellensgang@gmai | l.com. |
| A nonrefundable \$200 deposit for each week reserved. day of the reserved session. Payment can be made by V | , , , |
| | 6.6 |

