Maumelle Parks & Recreation 2018 CAMP REGISTRATION FORM

NAME ((First / Middle / Las	t):					
(Circle)	Male / Female	BIRTHDATE:	AGE <u>:</u>				
PAREN	T/ GUARDIAN NA	AME:					
ADDRE	ESS:						
CITY:_		STATE:	ZIP:				
PHONE	HONE (Home)Parents Work Phone						
EMAIL	ADDRESS						
NAME (OF PERSON(S) RE	SPSONSIBLE FOR DROPPI	NG OFF/PICKING UP FROM CAMP:				
		CONTACT #					
Any Exis	sting Medical Condi	tions:					
Emerger	ncy Contact:		Phone:				

Please check the camp(s) your child will be attending:

CAMP NAME	DATES	PRICE	TOTAL
GARDEN CAMP	JUNE 5-7	\$65.00	
JR. CHEF CAMP	JUNE 20-22	\$60.00	
ART CAMP	JULY 10-12	\$65.00	
SURVIVOR CAMP "X"	JULY 17-20	\$55.00	
BASKETBALL CAMP	JULY 24-26	\$55.00	
		GRAND TOTAL:	