

Art Camp 2017 Registration

art camper's name: _____

grade just completed: _____ date of birth: _____

Name of current school: _____

parent's name: _____

home phone: _____ cell phone: _____

work phone: _____

home address: _____

email address: _____

does the camper have any allergies or other medical concerns?

please make your checks payable to (and art camp location):

MARY JANE PORTWOOD
131 BEN HORTON DRIVE
MCDONOUGH, GA 30253

www.ARTSMARTFUN.COM