



Princess Day Camp 2018
REGISTRATION FORM

STUDENT NAME: _____

Date of Birth: _____ Age: _____

Phone Numbers

Parents Name/Mailing Address

Home: _____

Cell: _____

Other: _____

Email Address: _____

Camp Dates: Please check dates your child will attend

Monday August 6 - Thursday August 9 Full Day: _____ Half Day: _____

I agree to pay the full amount of camp Monday August 6th. Full day \$225.00 per student, half day \$135.00 per student.

Signature

Date