

CAMP CELEBRATION
5's APPLICATION FORM
2024

CHILD'S NAME _____

DATE OF BIRTH _____ Male Female (please circle) Parent/Guardian

#1 Name _____ Parent/Guardian

#2 Name _____ Address

_____ Best

email contact for Camp info: _____

Parent #1 Phone _____

Parent #2 Phone _____

**PLEASE SELECT YOUR WEEKS BELOW AND RETURN THIS APPLICATION
ASAP. CAMPER'S ARE ACCEPTED IN ORDER OF THE RECEIPT OF THIS
APPLICATION.**

_____ WEEK 1 MAY 28, 29, 30, 31

Tuesday, Wednesday, Thursday, Friday
9:00AM - 1:00PM

_____ WEEK 2 June 3, 4, 5, 6

Monday, Tuesday, Wednesday, Thursday
9:00AM - 1:00PM

_____ WEEK 3 JUNE 10, 11, 12, 13

Monday, Tuesday, Wednesday, Thursday
9:00AM - 1:00PM

_____ WEEK 4 JUNE 17, 18, 19, 20

Monday, Tuesday, Wednesday, Thursday
9:00 AM - 1:00PM

The cost for each week is \$275

**Camp may be paid for on a weekly basis.
Weeks may be added, if space is available.**