

CAMP CELEBRATION
Rising 4's and 5's APPLICATION FORM
2025

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.
CAMPERS ARE ACCEPTED IN ORDER OF THE RECEIPT OF THIS APPLICATION.**

_____	WEEK 1	MAY 27,28,29,30 Tuesday, Wednesday, Thursday, Friday 9:00AM - 1:00PM
_____	WEEK 2	June 2,3,4,5 Monday, Tuesday, Wednesday, Thursday 9:00AM - 1:00PM
_____	WEEK 3	JUNE 9,10,11,12 Monday, Tuesday, Wednesday, Thursday 9:00AM - 1:00PM
_____	WEEK 4	JUNE 16,17,18,19 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.