

A summer CAMP on WHEELS
Summer Camp Registration Form
Website: <http://summercamponwheels.com>
Email: contactus@summercamponwheels.com

Personal Information

Child's Name: _____

Date of Birth: _____

Address: _____
Street

City State Zip Code

Phone Number:
Primary _____ Secondary _____

Email Address:
Primary _____ Secondary _____

Mother's Name/Legal Guardian Father's Name/Legal Guardian

Emergency Contact Information

Emergency Contact (1) Name: _____

Phone: Primary _____ Secondary _____

Emergency Contact (2) Name: _____

Phone: Primary _____ Secondary _____

Emergency Contact (3) Name: _____

Phone: Primary _____ Secondary _____

Program Information

My Child will attend:

July 16-20 _____ for \$110 per week (ages 6-13)

July 23-27 _____ for \$110 per week (ages 6-13)

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Full payment is due by June 1st. If registering after this date, payment is due at registration