

## 2012 SANFORD CAMP REGISTRATION

CAMPERS NAME: \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_  
 CAMPERS DATE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_ Years/Months (as of July 1st)  
 GRADE AS OF SEPTEMBER : \_\_\_\_\_  
 EXTENDED DAY CARE: \_\_\_\_\_ Sanford \_\_\_\_\_ N. Wilmington

### Camp

Week Of:	6/18	6/25	7/2	7/9	7/16	7/23	7/30	8/6	8/13	8/20
Day Camp										
Lunch										

### Extended Day Care

Week Of:	6/18	6/25	7/2	7/9	7/16	7/23	7/30	8/6	8/13	8/20
<i>At Sanford</i>										
a.m.										
p.m.										

### Sports & Specialty Camps — Please Mark with "X"

Week Of:	6/18	6/25	7/2	7/9	7/16	7/23	7/30	8/6	8/13	8/20
Soccer	Boys			Girls						
Basketball				Boys			Girls	Boys		
Golf									Boys/Girls	
Baseball							Boys			
Volleyball					Girls					
Field Hockey								Girls		
Cheerleading						Girls				
Quarterback					Boys					
Rugby						Boys				
Cross Country		Boys/Girls								
Sewing		Beginner							Advanced	
Dance										Girls
Fashion	Girls									
Summer		<i>Summer School</i>								

Summer School 6/25/12 through 8/03/2012

**Please See Reverse Side**

# 2012 SANFORD CAMP REGISTRATION

**Campers Name:** \_\_\_\_\_

Billing Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mother's Cell Phone: \_\_\_\_\_

Mother's Work Phone: \_\_\_\_\_

Father's Cell Phone: \_\_\_\_\_

Father's Work Phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

**E-Mail Address:** \_\_\_\_\_

Current School: \_\_\_\_\_

Years Attending Our Camp: \_\_\_\_\_ Camp Attended Last Year: \_\_\_\_\_

Sanford Employee? \_\_\_\_\_

Comments: \_\_\_\_\_