

2010 SANFORD CAMP REGISTRATION

Campers Name: _____ Home Phone: _____

Billing Name: _____ Mother's Cell or Work Phone: _____

Address: _____ Father's Cell or Work Phone: _____

City: _____ State: ____ Zip: _____

Alt. Contact Name: _____ Phone: _____ E-mail Address: _____

School: _____ Years Attending Our Camp: ____ Camp Attended Last Year: _____

Camp ONE CHOICE PER WEEK – EITHER DAY CAMP or SPECIALTY CAMP										
Week of:	14-Jun	21-Jun	28-Jun	6-July	12-July	19-July	26-July	2-Aug	9-Aug	16-Aug
Day Camp										
Lunch										

Extended Day Care										
Week of:	14-Jun	21-Jun	28-Jun	6-July	12-July	19-July	26-July	2-Aug	9-Aug	16-Aug
<u>At Sanford</u>										
AM										
PM										
<u>Other</u>										
AM										
PM										

Sports and Specialty Camps										
Week Of:	14-Jun	21-Jun	28-Jun	6-July	12-July	19-July	26-July	2-Aug	9-Aug	16-Aug
Boys' Soccer										
Girls' Soccer										
Boys' BB										
Girls' BB										
Golf										
Baseball										
Volleyball										
Field Hockey										
Cheer leading										
Quarter back										
Arts									sew	dance
Cross Country										
Summer School										

(2010Sanford Camp Reg)

CAMPERS DOB
MALE / FEMALE
AGE: YEARS MONTHS (AS OF JULY 1 st)
GRADE AS OF SEPT.
SANFORD EMPLOYEE?

*North Wilmington
Extended Day
Drop off and pick up is at
St. Mary Magdalene
Church Hall on Rt. 202.

*Extended Day Care,
Sports, and Specialty
Camps require additional
completed forms.

Comments
() Yes () No
Please Use Other
Side For Comments