Summer Day Camp

3 5-day Sessions of Camp: July 14-18, July 21-25, & July 28-August 1 Monday-Friday-9:00 a.m.-4:00 p.m. Ages 5-12 \$150.00/week per camper (includes \$50 non-refundable deposit each week)

Provisions for early drop-off or late pick up

Campers must bring their own lunch-The camp will provide afternoon snacks for all campers.

Limited Space Available-REGISTER EARLY!!!

Please complete the form below. Make your check payable to NSU Fun & Fitness Camp (credit/debit card also accepted).

You can drop your completed registration form, along with your payment, by the NSU WRAC or mail it to:

Fun & Fitness Summer Day Camp

Attention: Jason Stelly

NSU WRAC Room 217

Natchitoches, LA 71497

NSU Fun & Fitness Summer Day Camp Registration Form

| Child's Last Name | | _ First Name | | | |
|------------------------------|---|---------------------|------------------|----------------|-----------------------|
| Age o Male o I | Female | Parent Emai | l | | |
| Please check all sessions ye | our camper will be attendin | ıg: o July 14-18 | o July 21-25 | o July 28-Au | igust 1 |
| Parent/Guardian's Last Na | me | First Name_ | | | |
| Street Address | | City | | State | Zip |
| Parent/Guardian Home Pl | hone | Parent Guardian | Work Phone_ | | |
| T-shirt Size: Children size | es o S (6-8) o M (10-12) | o L (14-16) A | dult sizes o S | оМ оІ | |
| <u>-</u> | relative or friend who can eased to other than the pare | | e of emergency | , if parents c | annot be reached, and |
| Name | Relationship | | Phone | | |
| Name | Relationship | | Phone | | |
| Family Physician | | | | | |
| List any medical problems | your child may have that w | would affect his/he | er participation | | |