

**Camp Sizzle Berry  
Registration  
Summer 2013**



Child's Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Parent's Name (s): \_\_\_\_\_

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

Phone: Home # \_\_\_\_\_ cell # \_\_\_\_\_

Parent Email: \_\_\_\_\_

**Emergency contact *other than parent(s)* listed:**

Name: \_\_\_\_\_ Number: \_\_\_\_\_

**Allergies or Health concerns:**

\_\_\_\_\_  
\_\_\_\_\_

PLEASE CHECK DESIRED SESSION(S) **AND** LOCATION(S):

**CALVARY:**

___ SESSION I	Little Book Worms	June 4, 5, 6 & 11, 12, 13
___ SESSION II	Island Adventure	June 18, 19, 20 & June 25, 26, 27
___ SESSION III	Happy Campers	July 9, 10, 11 & 16, 17, 18
___ SESSION IV	Imagination Creations	July 23, 24, 25 & July 30, 31 & Aug. 1

**COLONIAL:**

___ SESSION I	Little Book Worms	June 4, 5, 6 & 11, 12, 13
___ SESSION II	Island Adventure	June 18, 19, 20 & June 25, 26, 27
___ SESSION III	Happy Campers	July 9, 10, 11 & 16, 17, 18
___ SESSION IV	Imagination Creations	July 23, 24, 25 & July 30, 31 & Aug. 1

**Payment Options:**

- \_\_\_ Check for \$160.00 **per 2 week session** attached
- \_\_\_ I am a current family signed up for Automatic Withdrawal and I authorize payment on February 19, 2012.