## **APPLICATION FORM FOR CAMPERS ENTERING GRADES 4-6**

Registration is confirmed upon receipt of applicant's completed form and deposit. Read carefully. Applicants need to complete all parts according to directions.

## ADDITIONAL APPLICATIONS AND ONLINE ENROLLMENT FORM AVAILABLE AT WWW.SUMMERQUEST.ORG.

Camper Name	Gender	Da	ite of Birth	1		
Address	Phone					
City	0	e (Fall 2016)				
State	_					
Parent 1 Name		Work Phone		Cell Pho	ne/Pager	
Parent 2 Name		Work Phone				
Parent 1 Email				mail		
Special Grouping Req	uests:					
PLEASE CIRC	LE ALL APPROPRIA	ATE SECTIONS:				
Sessions:	Session 1 (6/6 – 6/1	Session	2 (6/20 - 7/1)	Session 3 (7/5	5 - 7/15)	
Before Care:	Session 1	on 1 Session 2		Session 3		
	e: Session 1 Session 2		2	Session 3		
After Care:	Session 1	Session	2	~		
T-Shirt Size:  A registration depo fourth through sixth	Child: S (6-8)	M (10-12) session fee is requisidents and \$475 fo	L (14-16) red with enrollr	Adult: S nent. The depos	oayable to	SummerQue
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SummerQuest does not discriminate based on race, color, religion or national/ethnic origin in its employment or admitting practices.

## PART 3 Indicate your top six activity choices for EACH session in which you are enrolling.

Campers will participate in **FOUR** sports/activities per day during each two-week session. Please rank your top **SIX** choices from the columns below (#1 = first choice, #5 and #6 = back up choices). Design the perfect two-week session with your friends!

	Session 1	Session 2	Session 3		Session 1	Session 2	Session 3
Archery				Jewelry Making			
Art Studio				PM Rec Swim			
Baseball			<del></del>	Robotics			
Basketball				Rock Band			
Beauty Shop			<del></del>	Rock Climbing			
Bowling	- <u></u> -		<del></del>	Rocketry			
Ceramics	- <u></u> -		<del></del>	Shapaga			
Cheerleading			<del></del>	Soccer			
Computer Animation				Stained Glass			
Crafty Corner				Strength & Conditioning			
Dance			<del></del>	Super Science			
Digital Photography				Swimming	·		
Engineering				Team Sports			
Fencing				Technotime			
Fun With Fabrics				Tennis			
Movie				Theater			
ron Chef				Web Page Design			
t's Magic				Woodworking			
				Wrestling			
PART 4							
f your child requires sp	pecial assistand	ce, please prov	vide details on the	he services requested:			
				•			
PLEASE READ AND	SIGN BELOW	TO NOTE A	AGREEMENT T	TO TERMS			

- In the event that my child needs emergency medical treatment and you are unable to reach the contacts provided on this form, I give my consent for SummerQuest to obtain, through a licensed medical professional and hospital of choice, such medical care that is reasonably necessary for the welfare of my child. I also agree to assume the cost for transport and treatment in such an emergency situation.
- I give permission for the image or likeness of my child to be used by SummerQuest on the camp website, in various camp-related publications and in media releases.
- I give permission for the School District of Clayton to contact me with information about my child or my child's summer program via a pre-recorded phone message or mobile text message to any of the phone numbers listed on this form.

SIGNATURE OF PARENT OR GUARDIAN:	DATE: