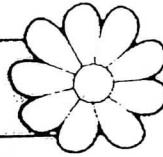




April Showers Bring May Flowers



APRIL VACATION CAMP

MONDAY APRIL 15TH

TUESDAY APRIL 16TH

WEDNESDAY APRIL 17TH

THURSDAY APRIL 18TH

FRIDAY APRIL 19TH

Childs Name _____ Age _____

Address _____

Town _____ State _____ Zip _____

Emergency Contact Name _____

Emergency Contact Number _____

Does Your child have any issues we should be aware of? _____

Does your child have any allergies? _____

If so please explain _____

Please Circle

Monday April 15th

Half Day A.M. 9:00-12:00

Half Day \$25.00

Half Day P.M. 1:00-4:00

Full Day \$50.00

Full Day 9:00-4:00

Tuesday April 16th

Half Day A.M. 9:00-12:00

Half Day P.M. 1:00-4:00

Full Day 9:00-4:00

Wednesday April 17th

Half Day A.M. 9:00-12:00

Half Day P.M. 1:00-4:00

Full Day 9:00-4:00

Thursday April 18th

Half Day A.M. 9:00-12:00

Half Day P.M. 1:00-4:00

Full Day 9:00-4:00

Friday April 19th

Half Day A.M. 9:00-12:00

Half Day P.M. 1:00-4:00

Full Day 9:00-4:00

Total Due _____ Payment _____