

BE WISE DAY CAMP

Application



July 28-30, 2010

Name: _____ Birthdate: ____ / ____ / ____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: () _____ Work Phone: () _____

Name of parents: _____

Preferred first name to be used on name tag: _____

School Name: _____ Present grade in school: 4 5 (circle one)

What is your favorite subject this year? _____

Please list school, community and church activities you participated in this year (e.g. music groups, patrol, student council, etc.) _____

What do you like to do in your spare time? (hobbies, etc.) _____

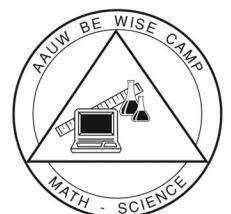
CAMP APPLICATION DEADLINE: May 1, 2010

Cost: \$175.00 which includes educational materials and daily lunch.

Make checks payable to: **Be WISE Day Camp**

SEND CHECK AND APPLICATION/TEACHER RECOMMENDATION FORM TO:

Mrs. Jane Wilson
3152 Kingstree Ct.
Dublin, OH 43017
(614) 766-9827



Where Girls Succeed