

Registration Form

Please check the weeks your child will be attending camp. A \$50 securing deposit for each week checked is required at the time of registration

Please fill out this form and return it with your payment.

We will send you a confirmation of your registration upon receipt.

Camper Information

Child's Name:

Birth Date: ____ / ____ / ____

Address: _____

City: _____ Zip: _____

Name of Parent(s)/Guardian:

Contact #: (____) _____

Contact #: (____) _____

T-shirt Size

Child: M L

Adult: S M L

Week 4 (July 5-9)

Week 1 (June 14-18)

Week 5 (July 12-16)

Week 7 (July 26-30)

Week 2 (June 21-25)

Week 6 Option A (July 19-23)

Week 8 (Aug 2-6)

Week 3 (June 28- July 2)

Week 6 Option B (July 19-23)

Week 9 (Aug 9-13)

Payment

Registration Fee: (one time) \$50

Deposits: ____ # of weeks X \$50: + _____

(deposit needed to reserve spot)

OR

Pay in full: ____ # of weeks X \$155 = + _____

Total: \$ _____

Make checks payable to Newport Mesa Day Camp

... Or register and pay online at www.newportmesa.org/daycamp.html