Camp GROW Registration Form

The GARD Center

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Phone: 268-462-6236 Email: eagantigua@gmail.com www.eagantigua.org



Camper's N	ame:													
		(please p	orint FUL	L name)									
Gender:	M	F		Can	nper's	Date	of Birth:	(Day / Month / Year)		=				
Mailing Ado	dress:													
Parent / Le	gal Gua	rdian:	Inleas	e nrint	FULL na	ıme)								
Email:				-		-		Cell Phone:						
Work Phon	e:							Home Phone:						
Campers wi purchase ad								ts are to be worn daily durii						
Camper T-S (kids s		e:	XS	S	М	L	XL	Camper T-Shirt Size: (adult size)	XS	S	М	L	XL	
I would like	to pur	chase _		ad	lditior	nal sh	irts for m	y camper for \$27 (EC) per sh	nirt.					
Parent or Gua	rdian's Si	gnature						Date	(Day / I	Month	/ Year)			
jud • I ur hor • Of ores	gment inderstai mesickn course t ult in di	n an er nd that ess. the use smissal	nerger no par of tob	ncy. rt of t	he fe	e is to	o be refur	d I authorize the camp staff nded in the event of dismiss lucts, or knives/weapons w of my child for print and ele	al for mis	cond perm	uct or itted.	withous Infrac	drawal f	or
□ Plea	se che	ck this	box if	f you	wou	ld lik	e us to c	all you about options for	financia	ıl ass	istano	æ.		
	The Ca	ımp GR	OW e	nrollr	nent	fee is	\$220 (EC	;)						
		Check E	Enclose	ed (Pa	yable t	o EAG,	. with a not	e in the memo that says "for Cam	p GROW")					
		Cash Er	nclosed	b										
		Scholar	ship											