

LUMBERTON RECREATION
2010 Spanish Summer Camp

FEE: \$99.00
AGES: 3-5, 4-6, and 7-9 years old.
DATE: August 9th – August 13th.
TIME: 10:00am – 12:00pm
LOCATION: Community Room – Twp. Building

This program is taught by one of CK Translations skilled educators.

Sports, games, music and water activities are presented with an innovative approach to teaching a foreign language.

Children *must* be picked up at 12:00pm.

Please remove at dotted line & keep for your information

Spanish Summer Camp

Participant's Name _____ Age: _____

Parent/Guardian Name _____ Email: _____

Complete Address: _____

Home Telephone # _____ Cell# _____

Emergency Contact: _____ Tel.# _____

Participant's Physician _____ Tel. # _____

Please list any physical or handicap restrictions related to the above participant.

PLEASE READ/SIGN I, _____, am registering to participate in all activities of the above registered program. In case of emergency, I authorize the program's assigned personnel to administer first aid treatment, transport me to the NEAREST hospital if necessary, and notify emergency contact as quickly as possible. In the event of an emergency due to accidents beyond their control, I hereby release Lumberton Department of Recreation, its supervisors, employees, sponsors and program volunteers, from all liability.

Signature

Date

DATE PAID _____ RECEIVED _____ CHECK# _____ \$ _____