

Creative Kids Camp

Registration Form Summer 2015

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www.leducationplace.com
Creativekidscamp2015@gmail.com

Student Information:

Last Name		_First Name	Middle Initial
Child's Address			
City	State	Zip Code	Phone Number
Date of Birth		Age	_ Grade Currently Completing
Name of School			Town —
Parents/Guardians:			
Last Names		_First Names	
Address if different than child			
City	State	Zip Code	Cell Number
Emergency Contact NameHome Phone NumberCell Number			
Does your child have any medical conditions or allergies we should know about? YES NO If yes, please explain			
Please select:			
Summer Sessions 2015]	<u>Theme</u>
Session 1:	June 8 th - June 12 th	Γ	Dive Deep with Aquatic Creatures
Session 2:	June 15 th - June 19 th	L	Love Where You Live: Florida Everglades
Session 3:	June 22 nd - June 26 ^t	:h V	Wild Weather
Session 4:	June 29th – July 3 ^r	d (Celebrate America's Independence
Session 5:	July 6 th – July 10 th	9	Settling on American Soil
Session 6:	July 13 th – July 17 th	[Discover Extinct/Endangered Animals
Session 7:	July 20 th – July 24 th	ı E	Explore Outer Space
Session 8:	July 27 th – July 31 st	T	Fravel the World

Total # of weeks:______@ \$300 per week=_____

Please make checks payable to Education Place. Credit cards are also accepted.