

APPLICATION FORM SEASONAL FUN PROGRAMS

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recent photo

Name: _____
Nationality: _____ Age: _____
Birthday: _____ Sex: Boy Girl
Address: _____
Zip Code: _____
Email address: _____
Home Phone: _____ Fax No: _____
Language Spoken at home: _____
Current School Attending: _____
Mother's Name: _____
Occupation: _____ Work Phone: _____
Place of Employment: _____
Mobile Phone No: _____
Father's Name: _____
Occupation: _____ Work Phone: _____
Place of Employment: _____
Mobile Phone No: _____

Please enroll my child in:

- Summer Camp Program Young Adventure's Club
 Session 1 Session 2 Session 3 Session 4 Session 5
 Session 6 Session 7 Session 8 Session 9 Session 10
 Session 11 Session 12
 Half Day Full Day
- Winter Fun Program
 Session 1
- Spring Fun Program
 Session 1
 Half Day Full Day

Parent(s) Signature and Date:

_____ _____ _____ _____
father date mother date



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