



TAMARAK'S CAMP LINCOLNSHIRE REGISTRATION FORM 2017

(Please Print)

Parent's First and Last Names: _____

Home Telephone: _____ Cell Phone _____

Street Address: _____

City/State: _____ Zip: _____

E-mail: _____

Camper's First and Last Name: _____

Shirt Size: 2/4 6/8 10/12 DOB: ____/____/____ Boy Girl

Weeks Attending: 7 weeks (Preschool and Kindergarten students) \$925

Lunch Bunch: Monday \$35 (with an extension class) / \$70 (without an extension class)
 Wednesday \$35 (with an extension class) / \$70 (without an extension class)
 Friday \$30 (with an extension class) / \$60 (without an extension class)

Extension Class: What's Cooking?! on Mondays \$200
 Let's Move! on Wednesdays \$200
 Art and Nature Explorers on Fridays \$175

School & Class Next Year: _____ pre3's 3's preK Kindergarten

Friendship Requests: 1st _____ 2nd _____

Deposit & Payment Information: Payment in full is due at the time of enrollment.

Payment Type: Check Discover MasterCard Visa Amount Enclosed: _____

Card Account No: _____ - _____ - _____ - _____

Exp Date: ____/____/____ 3 Digit Security Code on back of card: _____

Card Billing Street Number Only: _____ Zip Code: _____

Signature: _____ Date: _____

Required for registration

Registration forms can be mailed to Tamarak's Camp Lincolnshire
23970 N. Elm Road, Lincolnshire, IL 60069 or faxed back to 847-634-8262