



Peace Camp 2011

Registration Form

Camper's First Name _____ Last Name _____
Date of Birth _____
Emergency Contact Name _____ Cell Phone # _____
Medical Insurance _____
Family Doctor Name and Contact # _____

Please register my child for the following week of Peace Village Camp (check one):

July 11-15 (grades 8-10) July 18-22 (grades 4-7) July 25-29 (grades 1-3)

****Grades refer to the grade your child will be entering in the fall of 2011****

Parent/Guardian Names _____ Home/Cell # _____

Physical Address _____ Zip Code _____

Mailing Address _____ Zip Code _____ E-mail _____

Primary Language of Child _____ Does your child understand English? Yes No (circle one)

Allergies, special dietary restrictions, medical considerations, or accessibility concerns for your child: _____

If you would like to apply for a scholarship for your child to attend, please include a separate sheet of paper explaining your reasons and how much you are able to pay (**Scholarship application deadline July 1st**) →

Is there any information you can share with us that may help your child have the best experience at camp?

T-shirt size for your camper (circle one): **Adult:** S M L **Child:** 6 8 10 12 14

To apply, mail this form and your check for \$60 to:

Peace Village Las Cruces, 1701 E. Missouri Ave, Las Cruces, NM 88001

DEADLINE FOR THIS APPLICATION IS July 8TH. Each week of camp is limited to 40 campers, and will be filled on a first come, first served basis. Please register early!

(For Peace Village Camp Coordinator Use Only)

Date Application Received _____ Date of Acceptance or Notice of Wait List Mailed: _____

Date Scholarship Applied _____ For \$ _____ Scholarship Granted: Yes No For \$ _____

Check # Received: _____ For \$ _____