

# RESERVE YOUR SPOT TODAY!!!

## RFDC SUMMER CAMP 2009

Child's full name \_\_\_\_\_

Male/Female \_\_\_\_\_

Nickname/if any \_\_\_\_\_

Age \_\_\_\_\_

School \_\_\_\_\_ Grade \_\_\_\_\_

Home address \_\_\_\_\_

Street Address

City

State

Zip Code

Mother's Name \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Father's Name \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Completion of this card only reserves your child's spot until 50% deposit due date of May 1, 2009  
Deposit must be made by May 1 deadline to ensure your child's spot in the program.