

2021 CAMELLOT ACADEMY ENROLLMENT FORM

SESSION DATES: JUNE 7, 2021 – JULY 1, 2021



Please mail the completed enrollment form along with a \$100 non-refundable enrollment fee to: Camelot Academy 15506 Cedar Lane Basehor, KS 66007

Camper's First and Last Name:	
Camper's Complete Mailing Address:	
Father's Name: _____ Mother's Name: _____ Parent Camper Resides With, Select One: <input type="checkbox"/> Father <input type="checkbox"/> Mother <input type="checkbox"/> Both	Student is (circle one): <input type="checkbox"/> Male <input type="checkbox"/> Female Student's Birthdate: ____/____/____ Camper's Grade Fall of 2021: _____ What School will the Camper Attend in the Fall of 2021? _____
Parent Email Address 1:	Parent Email Address 2:
Father Phone:	Mother Phone:
Father Employer:	Mother Employer:
Father Work Phone:	Mother Work Phone:

Each Camper Will Receive One Camp T-Shirt Please Circle Selected Size Below:

Youth Small	Youth Medium	Youth Large	Adult Small	Adult Medium	Adult Large	Adult X-Large
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I am interested in purchasing an additional t-shirt (\$15.00)

Please Check the Enrollment Type for this Camper (select only one option).

Senior Division (4 th Grade – 9 th Grade) Session – check one box below	
<input type="checkbox"/> 1 Week, am only - June 7 - 11 (9 am - 12 pm) \$200 <input type="checkbox"/> 1 Week, am only - June 14 - 18 (9 am - 12 pm) \$200 <input type="checkbox"/> 1 Week, am only - June 21 - 25 (9 am - 12 pm) \$200 <input type="checkbox"/> 4 weeks, am only - June 7 - July 1 (9am –12 pm) \$800	<input type="checkbox"/> Yes, I approve <input type="checkbox"/> No, please do not share photos of my child Initials: _____ Date: _____
Please initial the box to the right if you give us permission to use photos of your child to promote Camelot Academy including, but not limited to our website, social media channels, local news media, printed collateral or promotional videos.	

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Payment Type (choose one)	<input type="checkbox"/> Check Enclosed for Full Amount <input type="checkbox"/> Deposit Included, I Will Pay the Remaining Balance on or before the first day of camp. <input type="checkbox"/> I would like to discuss other payment options
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I affirm that the information provided above is accurate.

Signature

Date

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If there is additional information that we should know about this camper, including allergies or medical conditions, please describe below.

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