ARKANSAS INTERFAITH CONFERENCE CHOIR CAMP 2015 CAMPER REGISTRATION FORM

(Please use separate form for each child.)

July 19 - July 25, 2015

Camper Name	Call Name	
Street Address	Camper Cell Phone	
City	State	Zip
Place of Worship	Camper's E-mail	
Home Phone	Emergency Phone	
Camper Birth date	Age as of July 1st, 2015	Sex
Grade COMPLETED in May, 2015 (You must have comp	5	for camp.)
Parent Name: Mom	Dad	
Parent Email: Mom	Dad	
Parent Cell Phone: Mom	Dad	
What musical instrument do you pla	ou play?Will you bring it to camp?	
T-shirt size: Child SChild M	M Adult S M	L XL
Please mail (NO FAXES OR EMAI	LS) a recent photo with camper n	name on the back by June 1st.
Roommate choices:		
Requested music for the dance:		
If I could change one thing at AIC C		
Please return the registration form veloposit as soon as possible to hold family.) Total payment of fees is degistrations that are paid online with	your place. (Fee is \$275.00 ea ue by June 1st, 2015. No refunds	ch for other children in the same will be made after July 1st, 2015
The medical form <u>must be</u> complete 2015.	eted to check in at camp.	Please return it by July 1st
Mail this form to: (DO NOT FAX)	Please make check payable	to AIC Choir Camp 2015.
AIC CHOIR CAMP 2015 St. Paul's Church P.O. Box 1190	Total Fee \$ 300.0 Enclosed \$	
Fayetteville, Arkansas 72702 E-mail: cr273@aol.com	Balance Due \$	or \$
Cindy Tisdale in Little Rock - (501) Charlie Rigsby in Fayetteville - Chu		09-5679

For Office Use Only: Photo_____Med Form_____Pmt_____Balance____