

LAKE VILLA TOWNSHIP'S PEACOCK CAMP SUMMER ADVENTURE DAY CAMP REGISTRATION

(entering grades K - 8)

Primary Guardian

Last Name _____ First Name _____ E-Mail _____

Home Phone _____ Cell Phone _____ Work Phone _____

Address _____ City _____ Zip _____

Emergency Contact _____ Emergency Phone _____

Check box if you would like to be added to our e-mail list.

Shirt sizes: YS 6-8, YM 10-12, YL 14-16, AS, AM, AL, AXL

Campers Name	Male/ Female	Birthday	Grade	Shirt Size	# of Sessions	Session Fee	Extended Care? Please list AM, PM or Both	Total Fee
camper 1								
camper 2								
camper 3								

Add T-Shirt \$12

Add Cinch Bag \$5

CHOOSE YOUR 1901: 6/10-14 1902: 6/17-21 1903: 6/24-6/28 *1904: 7/1-5

SESSION(S) 1905: 7/8-12 1906: 7/15-19 1907: 7/22-26 1908: 7/29-8/2

1909: 8/5-9

DEPOSIT PAID 10%

TOTAL DUE

SESSION FEES

Resident: \$160 for one week, \$8 off for multiple weeks *1604 is \$128 due to July 4th holiday

Non-Resident: \$180 for one week, \$8 off for multiple weeks *1604 is \$144 due to July 4th holiday

Extended Care: \$25 for AM, \$25 for PM or \$40 for both AM & PM (no discount for multiple weeks)

Deposit: 10% total of total due, per camper

Please list any special requests or accommodations needed if any:

Signature of Primary Guardian _____ Date _____

PAYMENT TYPE _____ CC # _____

CASH _____

CHECK _____ EXP DATE MM/YYYY _____ CVV CODE _____

CREDIT _____

NAME ON CARD _____ SIGNATURE FOR AUTO-BILL _____