

**Cely's House Preschool Camp 2012
Registration Form**

Please return with a **\$50 non-refundable deposit per child for each session** to hold applicant's place.
Check should be made out to Cely's House.

Campers
Name _____ Boy _____ Girl _____ Age _____

Parents Names _____

Address _____

E-Mail _____

Home # _____ Work # _____ Cell # _____

Indicate the weeks and times you would like your child/children to attend.
(Please note your second choice if the class you choose is full)

Week 1 June 4-8 **Morning (9:00 – 12:00)** **A Week at the Beach** (\$200) _____

Week 2 June 11-15 **Morning (9:00 - 12:00)** **A Week in the Woods** (\$200) _____

Lunch Bunch **12:00 – 1:00** **Bring a Bag Lunch** (\$ 50) _____

Total Amount for Art Camp _____

Minus Deposit sent in (\$50 each session) _____

Balance Due first day of camp _____

Date Received _____ Deposit _____ Confirmation Sent _____ Balance Paid _____

Cely's House
115 Dixie Drive
Chapel Hill, NC 27514
(919-929-3591)
www.celyshouse.com