KRUNCH KIDS Summer Fitness Camp 2016

Child's Name							
(Last)	(First)						
Address							
(Street)	(City)			(Zip)			
Parent's Name		Phone_				 	
Parent e-mail address							
Emergency Contact Name	Phone						
Upcoming Grade Level for 2016/2017 (please circle):	1 st	2 nd	3 rd	4 th	5 th	6 th	
T-shirt size: (please circle) <u>YOUTH</u> - 5 M *T-shirt included with Full Camp registration <u>only</u> .						L XL 2 a shirt.	
Please place a check mark next to the type of co	amp you	are r	egiste	ring f	or:		
through July 28- \$190 —— WEEKLY- \$50 per week *If weekly, please place a check mark next to each we	eek you a	re regis	tering	for:			
(June 20-23) - \$50							
(June 27-30) - \$50							
(July 5-July 7) - \$50							
(July 11-14) - \$50							
(July 18-21) - \$50							
(July 25-28) - \$50							
PAYMENT: Registration form and payment are due by money order payable to "Krunch Kids". If registering completed registration form to:						check or	
Krunch Kids							
1405 Elizabeth St.							
North Myrtle Beach	, SC 2	9582					
By submitting this registration form and non-refundab whose name appears above, to participate in the Krund	_ · ·	_	•			ny child,	
Parent/Guardian Signature	Date						