

Next Generation Academy



Summer Camp Registration Form

Name: _____ Gender: ____ DOB: ____ AGE: ____ T-shirt _____

Address: _____ City: _____ Zip: _____

Cell Phone: _____ Emergency Contact: _____

Email: _____

PLEASE INDICATE CAMP SESSION(S)

Session 1 / JUNE 17-20TH/ BOYS 9 am - 12 pm (Ages 9-14) Cost \$155

Session 2 / JUNE 17-20TH/ GIRLS 1 pm - 4 pm (Ages 9-14) Cost \$155

Session 3 / JUNE 24-27TH / BOYS 9am - 12pm (High School Age) Cost \$155

Session 4 / JUNE 24-27TH / GIRLS 1pm - 4pm (High School Age) Cost \$155

Total: \$ _____ Checks Payable to Next Generation Academy

Charge my Credit Card:

Cardholder Name: _____ Signature: _____

Card Number: _____ Exp. Date: _____

CSC: _____ (Located on back of card)