

# CIRCUS CAMP

## DAVIS ACADEMY - DUNWOODY - 2010 REGISTRATION FORM - PAGE 1 OF 2

<b>Camper #1</b> Name _____					Date of Birth _____	
1: June 7-11 <input type="checkbox"/> Full Week <input type="checkbox"/> Try Me Day	2: June 14-18 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	3: June 21-25 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	4: June 28-July 2 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	<b>Adv. Aerial:</b> July 5-16 <input type="checkbox"/> Two Weeks	<b>Ext. Magic:</b> June 21-25 <input type="checkbox"/> Full Week	
5: July 5-9 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	6: July 12-16 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	7: July 19-23 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	8: July 26-30 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day			
<b>BeforeCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>AfterCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>T-Shirt - Size</b> <input type="checkbox"/> Child 6-8] <input type="checkbox"/> Child 10-12] <input type="checkbox"/> Small] <input type="checkbox"/> Medium] <input type="checkbox"/> Large] <input type="checkbox"/> X-Large]						

<b>Camper #2</b> Name _____					Date of Birth _____	
1: June 7-11 <input type="checkbox"/> Full Week <input type="checkbox"/> Try Me Day	2: June 14-18 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	3: June 21-25 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	4: June 28-July 2 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	<b>Adv. Aerial:</b> July 5-16 <input type="checkbox"/> Two Weeks	<b>Ext. Magic:</b> June 21-25 <input type="checkbox"/> Full Week	
5: July 5-9 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	6: July 12-16 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	7: July 19-23 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	8: July 26-30 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day			
<b>BeforeCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>AfterCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>T-Shirt - Size</b> <input type="checkbox"/> Child 6-8] <input type="checkbox"/> Child 10-12] <input type="checkbox"/> Small] <input type="checkbox"/> Medium] <input type="checkbox"/> Large] <input type="checkbox"/> X-Large]						

<b>Camper #3</b> Name _____					Date of Birth _____	
1: June 7-11 <input type="checkbox"/> Full Week <input type="checkbox"/> Try Me Day	2: June 14-18 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	3: June 21-25 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	4: June 28-July 2 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	<b>Adv. Aerial:</b> July 5-16 <input type="checkbox"/> Two Weeks	<b>Ext. Magic:</b> June 21-25 <input type="checkbox"/> Full Week	
5: July 5-9 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	6: July 12-16 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	7: July 19-23 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	8: July 26-30 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day			
<b>BeforeCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>AfterCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>T-Shirt - Size</b> <input type="checkbox"/> Child 6-8] <input type="checkbox"/> Child 10-12] <input type="checkbox"/> Small] <input type="checkbox"/> Medium] <input type="checkbox"/> Large] <input type="checkbox"/> X-Large]						

<b>Camper #4</b> Name _____					Date of Birth _____	
1: June 7-11 <input type="checkbox"/> Full Week <input type="checkbox"/> Try Me Day	2: June 14-18 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	3: June 21-25 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	4: June 28-July 2 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	<b>Adv. Aerial:</b> July 5-16 <input type="checkbox"/> Two Weeks	<b>Ext. Magic:</b> June 21-25 <input type="checkbox"/> Full Week	
5: July 5-9 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	6: July 12-16 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	7: July 19-23 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day	8: July 26-30 <input type="checkbox"/> Full Week <input type="checkbox"/> Try-Me Day			
<b>BeforeCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>AfterCare</b> Session(s): [1: M T W T F] [2: M T W T F] [3: M T W T F] [4: M T W T F] [ <b>Adv. Aerial:</b> M T W T F M T W T F] Circle day(s) [5: M T W T F] [6: M T W T F] [7: M T W T F] [8: M T W T F] [ <b>Ext. Magic:</b> MTWTF ]						
<b>T-Shirt - Size</b> <input type="checkbox"/> Child 6-8] <input type="checkbox"/> Child 10-12] <input type="checkbox"/> Small] <input type="checkbox"/> Medium] <input type="checkbox"/> Large] <input type="checkbox"/> X-Large]						



DAVIS ACADEMY - DUNWOODY - 2009  
**REGISTRATION FORM - PAGE 2 OF 2**

Parent Name \_\_\_\_\_

Camper(s) Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Family E-mail Address \_\_\_\_\_

**Payment Info**

Registration requires at least a 50% non-refundable deposit on camp sessions and 100% on shirt orders.  
Balance is due by May 22, 2009.

Camp Session(s) (\$275 per week).....\$ \_\_\_\_\_  
Advanced Aerial (\$620 two weeks).....\$ \_\_\_\_\_  
Extreme Magic (\$290 one week) .....\$ \_\_\_\_\_  
Try-Me-Day (\$60 per child/Monday) .....\$ \_\_\_\_\_  
(Pre-Registration) Before Care (\$10 per time) \$ \_\_\_\_\_  
(Pre-Registration) After Care (\$10 per time) ...\$ \_\_\_\_\_  
Circus Camp T-shirt (\$20 per shirt).....\$ \_\_\_\_\_  
Total Amount Due.....\$ \_\_\_\_\_  
  
Amount Enclosed.....\$ \_\_\_\_\_

**METHOD OF PAYMENT**

**Check/Money Order** enclosed (Payable to **Circus Camp**)

Check/Money Order Number \_\_\_\_\_

**Credit Card**  MasterCard]  VISA]

Card Number \_\_\_\_\_

Exp \_\_\_\_\_ Security code \_\_\_\_\_

Authorized Signature \_\_\_\_\_

Please mail this form with payment to:

**Circus Camp**

P.O. Box 1797 Decatur, GA 30031

Phone: (404) 370-0001 - Or fax it to: 404-393-9443

[www.CircusCamp.org](http://www.CircusCamp.org)