

Summer Adventures 2011 Registration Form

Please complete one registration per child.
Additional forms are available at Topoka Collegiate School or on the website,
www.topekacollegiate.org.

Contact Karen Benson with questions at kbenson@topekacollegiate.org.

Student's Name: _____ Date of Birth: _____ M or F _____

Entering Grade: _____ School: _____

Parent(s)/Guardian(s): _____

Street Address: _____

City, State, Zip: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Email Address: _____

The following information is required for emergency purposes:

Doctor's Name: _____ Phone: _____ Preferred Hospital: _____

Emergency Contact: _____ Relation to student: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Allergies or other pertinent information restricting activities: _____

I give permission for: (student's name) _____

Please check those that apply:

_____ to go on field trips _____ be treated by qualified personnel in emergencies _____ be photographed for school publications

Signature: (parent or guardian): _____ Date: _____

Camp Registration Summer 2011

Camp Name	Camp Date	Camp Time (Circle)	Camp Fee	Deposit	Amount due 1st day of camp (camp fee less deposit)	OFFICE USE ONLY
		9:00-12:00				
		12:30-3:30		\$25		
		9:00-3:30				
		9:00-12:00		\$25		
		12:30-3:30				
		9:00-3:30		\$25		
		9:00-12:00				
		12:30-3:30		\$25		
		9:00-3:30				
		9:00-12:00		\$25		
		12:30-3:30				
		9:00-3:30		\$25		
		9:00-12:00				
		12:30-3:30		\$25		
		9:00-3:30				
		Total:				

Enclose check payable to:

TCS Summer Adventures

Mail to:

Topoka Collegiate School
 Summer Adventures 2010
 2200 SW Eveningside Drive
 Topeka, KS 66614

Deposit Information

\$25 for each Summer Adventure Camp
\$25 for Summer Day Camp
 Deposits will be applied to camp fees.

Camp Registration Summer 2011

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		12:30-3:30				
		9:00-3:30		\$25		
		9:00-12:00				
		12:30-3:30		\$25		
		9:00-3:30				
		9:00-12:00		\$25		
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