



Youth Summer Camps 2008



Registration Form



June 16th - July 25th
Youth Ages: 5-12



I'm registering for the following camp(s):

- Soccer Camp Week 1 ~ *June 16-20*
- Jr. NBA/Jr. WNBA Camp Week 4 ~ *July 7-July 11*
- Volleyball Camp Week 2 ~ *June 23-27*
- All-Sports Camp Week 5 & 6 ~ *July 14-July 25*
- Tennis Camp Week 3 ~ *June 30-July 3*

\$75 each camp per week except Jr. NBA/Jr. WNBA which is \$90.

Amount Due \$ _____

(Please Print)

Child's Name: _____ Sex: _____ Age: _____ DOB: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell: _____ Work: _____

Emergency Contact:

Name: _____ Relationship to Child: _____ Number: _____

Parent Email: _____ **Youth Email:** _____

Child's School: _____ Grade: _____

Parent Signature: _____

With your signature as parent, you agree to hold Abayomi CDC, New St. Mark Baptist Church, New St. Mark Family Life Center, its entities, volunteers, and employees harmless for any claim or action that might arise on behalf of yourself or your child while enrolled in Youth Summer Camps.

For Office Use Only: Amount Paid _____ Date Paid _____ Cash _____ Chk No. _____

Make check payable to Abayomi CDC, and if cash, you must have correct amount.
Return this form to: Abayomi CDC, 24331 W. Eight Mile Rd., Detroit, MI 48219, (313) 541-9828

For more information visit our website at: www.abayomicdc.org.

Registration Fee is \$25 and is non-refundable.