

CAMP KETCHA ADD/CHANGE FORM SUMMER CAMP 2017

PLEASE REMEMBER DEPOSITS AND REGISTRATION FEES ARE NON-REFUNDABLE

Child's Name _____ DOB ____/____/____

Please Check the Appropriate Box & Specify Additions/Changes:

CANCEL my child from the following camp(s)

week(s) _____ camp name(s) _____

week(s) _____ camp name(s) _____

week(s) _____ camp name(s) _____

I have read and understand the cancelation policies

TRANSFER my child's deposit/registration for the following camp(s)

FROM: week(s) _____ camp name(s) _____

TO: week(s) _____ camp name(s) _____

ADD the following camp week(s) for my child to attend

week(s) _____ camp name(s) _____

week(s) _____ camp name(s) _____

week(s) _____ camp name(s) _____

Parent's Signature _____ Date _____

Parent's Name _____ Parent's Daytime Phone _____

OFFICE USE ONLY:	Date Received:
Office staff initials:	Date of Change: