

2017 SUMMER CAMP BENNING REGISTRATION FORM

Camper First and Last Name _____ Age _____

Parent/Guardian First and Last Name _____

Parent/Guardian Email address _____

Parent/Guardian Mailing Address _____ City: _____

State _____ Zip _____ Contact Phone # _____

In case of an emergency, please list the name and number of someone else we could contact

Emergency Contact Name _____ Em. Contact # _____

Does your student have any allergies or medical conditions we need to know about? If so, what are they?

Is anyone else authorized to pick up your camper? Please list their name(s) and phone number(s)

What T shirt size does your child wear? Youth- S M L Adult- S M L

How did you learn about our summer camp? (please circle one)

Summer Camp Flyer Newspaper TV/Radio Internet Word of Mouth

At School Other (please specify) _____

Is your student the son or daughter of active or retired military? _____

What camp will your student attend? (please circle)

June 12-16 "Objective: The Last 100 Yards" June 19-23 "Leadership II" Jun 26-30 "Boots on the Ground"
July 10-14 "Leadership Camp I" *June 6-9 "CIT"

**There is an application and Interview process for this camp session.*

Registration checks should be made payable to The National Infantry Foundation. The cost is \$200 per week per session, per camper. Early-bird registration and military discounts are available for \$180 per session per camper. *CIT Course is \$130 per camper. Early registration ends on May 1st. Some scholarships are available.

Contact (706) 653-9234 ext. 5849 / campdirector@nationalinfantryfoundation.org for details.

Please drop off at the Museum or mail to: Education Department, National Infantry Museum, 1775 Legacy Way, Suite 220, Columbus, GA 31903

(FOR MUSEUM USE ONLY)

Registration Fee Paid On _____ Entered in Database on _____

Paid by: CASH CHECK (#) _____ Credit _____ EXP. _____

Amount paid: _____ Notes: _____