

St. Matthew Lutheran Raider Camp

5885 N. Venoy Rd
Westland, MI 48185
(734) 425-0395
Herz1984@aol.com

Registration Form – 2017

Summer Camp June 5 – August 18, 2017

Child's Full Name: _____

Date of Birth: ____/____/____ Grade child will be entering in fall 2017 _____

Home Address: _____

City: _____ Zip code: _____

Mother's Name: _____

Home Phone: _____ Cell Phone: _____

Father's Name: _____

Home Phone: _____ Cell Phone: _____

Registration fees are \$35.00 per child or \$50.00 per family

Summer camp tuition is \$36 per full day or \$18 per half day (7:00- 1:00) or (12:30-6:00)

Siblings will receive a 10% discount.

If paying by check please make them out to St. Matthew Lutheran

Please check the weeks your child will be attending

June 5-9 __	June 12-16 __	June 19-23__
June 26-30__	July 5-7 __	July 19-14 __
July 17-21 __	July 24-28 __	July 31-Aug 4 __
Aug 7-11	Aug 14-18 __	

Days and hours child will be attending Raider Summer Camp

____ Monday	Drop off time _____	Pick up time _____
____ Tuesday	Drop off time _____	Pick up time _____
____ Wednesday	Drop off time _____	Pick up time _____
____ Thursday	Drop off time _____	Pick up time _____
____ Friday	Drop off time _____	Pick up time _____

Thank you for choosing St. Matthew Lutheran Raider Summer Camp.

Please return this and any other forms along with the registration fee to secure your child's place.

St. Matthew Lutheran School
734.425.0261