



5200 Old Mill Road 260-456-0400

Camper's Name	M	_ F	Birthdate:		_ Age at Camp:
Address:	City _		Stat	te:	_Zip Code
Parent's Contact Information:					
lame Phone (Cell #)			Work		
Name Phone (Cell #)			Work		
Parents' e-mails:					
CAMP JOE SHIRT INCLUDED!! Mark the size below:					
CHILD: XS S M L	ADULT: S		VI L XI		Enter Totals Below
WEEK #1: JUNE 23 -27         Camp Day: 9AM – 4PM           Check Days Needed         •           •         AM Care         23 <sup>rd</sup> 24 <sup>th</sup> 25 <sup>th</sup> •         PM Care         23 <sup>rd</sup> 24 <sup>th</sup> 25 <sup>th</sup>	26 <sup>th</sup> 2 26 <sup>th</sup> ****		\$7.50/day	eek _ 	
WEEK #2: JUNE 30 – JULY 4Camp Day: 9ANCheck Days Needed $AM$ Care $30^{th}$ $1^{st}$ $2^{nd}$ • PM Care $30^{th}$ $1^{st}$ $2^{nd}$ $2^{nd}$ • PM Care $30^{th}$ $1^{st}$ $2^{nd}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $1^{st}$ $2^{nd}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$ • PM Care $30^{th}$ $30^{th}$ $30^{th}$ $30^{th}$	_3 <sup>rd</sup> 4 <sup>th</sup>		\$5.00/day \$7.50/day	eek	
WEEK #3: JULY 7 - 11       Camp Day: 9AM – 4PM         Check Days Needed       •         •       AM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1         •       PM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1         •       PM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1         •       PM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1         •       PM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1         •       PM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1         •       PM Care       7 <sup>th</sup> 8 <sup>th</sup> 9 <sup>th</sup> 1	10 <sup>th</sup> 11 <sup>th</sup>		\$7.50/day	ek	
OPTIONAL 5 x 7 Camp Picture (\$3.00): Sibling Discount (Max per family: -\$20.00):					
EARLY Registration Discount (Register by Friday, Feb 28 <sup>th</sup> to redeem the \$20 off per week coupon):					
BALANCE to be paid by Friday, May 23 <sup>rd</sup> (Check or pay online):					
Now Available – pay online – <u>www.fwjf.org</u>					
Click DONATE -> Camp Joe and enter amount. Note there is a fee, so please choose to add this fee if using this service. Please Note: We want all children to have the opportunity to attend camp. Limited assistance is available.					

I am interested in assistance for my child(ren): \_\_\_\_\_ Yes \_\_\_\_\_No