



# CAMP WINADU

### Owners/Directors:

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3 New King Street, White Plains, NY 10604  
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## FATHER AND SON WEEKEND 2012

My son(s) \_\_\_\_\_  
First, Last (Please Print)

and I, \_\_\_\_\_ would like to enroll in the annual Father and Son Camp  
First, Last (Please Print)

from Saturday, August 11th through Sunday, August 12th, 2012. I plan to arrive at 10:00 am on Saturday.

**Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Home Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Occupation \_\_\_\_\_ Email \_\_\_\_\_

Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

### Joining us will be:

Name of Additional Adult \_\_\_\_\_ Relationship \_\_\_\_\_

Name of Additional Child \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_

**TUITION: \$200 per Family**

Please send additional  Father and Son  Discovery Week  Rookie Days information to my  Friend  Relative

Name \_\_\_\_\_ Phone \_\_\_\_\_

Child's Name \_\_\_\_\_ Date of Birth / Age \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address \_\_\_\_\_