

COMMUNITY LANGUAGE SCHOOL BEAR CAMP REGISTRATION 2019

***for children entering 1st-7th Grade (approx. age 5-13) in the Fall of school year 2019

Today's Date:					
		Last NameNickname			
Age during camp:	Child's Grade:Child's	s Gender:			
Street Address or Box # _					
City	Zip Code	Preferred Phone			
Other Phone	E-mail				
Food/other allergies, ar	ny relevant medical condition				
strictly in accordance wit pages and other online U	th university policies and the laws o	of Arkansas, for the purpose gazine feature articles and	of creating fliers/b	ese images/recordings may be used rochures/university-sponsored web naterials for the UCA-CLS progran	
 Parent/Guardian Prir	nted Name Signature			_	
	CH FOR YOUR CHILD WIT o(s): Daily Schedule: 8:30 - 3:00p		UT PRODUCTS	S, PLEASE!	
July 15	i-July 19: East Asian Adventure	July 22-26: South of th	ne Border (Latin/Ce	entral/South America)	
		Both weeks			
	\$150.00 for one	child per week.			
If you have more that the discount for secon	n one child coming to camp, and child	please call 501-852-200	54 or email <mark>ruth</mark> i	c <mark>auca.edu</mark> about	
Return registration	form(s) with check made pa	yable to:			
UCA Commu	nity Language School				
Dept. of Lang	Linguistics Dept. ATT: Ruth Clauges & Linguistics, Irby 207 they Ave, Conway, AR 72035	layton			
Questions:					
Call 501-733-	.9541 or email dhouse@uca.edu	l	\$	Total enclosed	

**************************************	USE ONLY***********************************
Date Payment rec'd	Form of payment: check #
Receipt #	Refund date & amount
Date of Deposit Notes:	rev. 2/28/18