



Camper Application

Student Name

First Name

Last Name

Middle Initial

Address

Number & Street

City

State

Zip

Birthdate

MM/DD/YYYY

Age

Grade NEXT Year

Email

Phone

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School *(Please Print)*

Preferred Area of Focus *(please choose only one)*

- DANCE
- MUSICAL THEATRE
- WRITING
- COOKING
- VISUAL ART

Quick Questions

Circle One

1. Have you been to any art, music, cooking, or writing camps before?

YES / NO

2. How long have you been interested in your art?

Recently / For a while

3. Tell us very briefly what it is you do; What's your thing?

Medical Concerns

Does the applicant have any medical concerns about which we should know?

Thank you for applying! Please return this application to St. Peter's Church, Courthouse Square June 25th!!!!

Please return application by mail or in person to:

**ST. PETER'S EPISCOPAL CHURCH
311 High Street
Paris, KY 40361**

Deadline: JUNE 25th

**Please see our brochure or our website for more details
www.stpetersparis.org**