

CAMPER NAME: First _____ Last: _____ Tele # _____

TIME YOU NORMALLY PICK UP YOUR CHILD: _____ CHILD'S GRADE in SEPT. '18 _____

Please fill out your child's class selections, numbering most (#1) to least (# 10) favorable, for each day. Number all preferences from 1-10 for your child. Example: My son LOVES Cartooning so I will place # 1 on the line next to that class. However, he doesn't like sports, so I will place # 10 on the line next to Tennis. (There should be a number on every line in each time slot.) * Note: The same classes will be held from 3:30 – 4:15 and 4:30 – 5:15 each day. We will try to accommodate your child's class selection rankings for both time spots.

<u>MONDAY</u>	<u>WEDNESDAY</u>
_____ TENNIS	_____ TENNIS
_____ KITCHEN WIZARDS	_____ GAMES GALORE
_____ HIGH SCHOOL MUSICAL	_____ SUPER SOCCER STARS
_____ MOVE TO THE BEAT	_____ CREATION STUDIO
_____ CREATION STUDIO	_____ RHYTHM IS GONNA GET YA
_____ BASKETBALL	_____ PAINTING WITH A TWIST
_____ LAB KIDZ	_____ BRICK A PALOOZA
_____ GYMNASTICS-TAG YOU'RE FIT!	_____ FOOD SCIENCE
_____ TOON TIME	_____ KARATE
_____ AWESOME ENGINEERS	_____ HORSING AROUND
_____ MIND GAMES	_____ ULTIMATE SKILLS

For office use only: # _____