



Franciscan Life Center 2017 Land-Based Summer Experiences for Children

The Franciscan Life Center's land-based summer experiences for children will be offered for two sessions this summer for 6 to 12 year olds on the campus of the Franciscan Life Center.



- DATES:** Session 1 - June 26 – June 30, 2017
Session 2 - July 24 – July 28, 2017
- TIME:** 9:30 am – 3: 00 pm
- PLACE:** Franciscan Life Center Campus, 271 Finch Avenue, Meriden, CT 06451
- ACTIVITIES:** Confidence and team building games, survival skills, creek and stream exploration, service project, sports, crafts and campfire bread making
- FEE:** \$180.00 per child
- FOOD:** Please send a bag lunch. Drinks and snacks will be provided.

Please complete a separate registration form for each child.

Send the registration form(s) and fee to Rosellyn Giampietro, Franciscan Life Center, 271 Finch Avenue, Meriden, CT 06451. Checks should be made payable to the Franciscan Life Center.

A consent form and a media release form will be sent to you with verification of your child's registration a month before the session begins.

The Youth Leadership Training Program for children between the ages of 13 and 14 will be held from June 26 through June 30, 2017. For more information about this program or to obtain the application visit our web site, www.flcenter.org or call 203-237-8084.

**FRANCISCAN LIFE CENTER
SUMMER ENRICHMENT PROGRAM
2017 REGISTRATION FORM**

Name of Child _____

Nickname _____

Choose one session June 26th – June 30th _____ July 24th – July 28th _____

Current Age _____ Date of Birth _____ Boy ___ Girl ___

Age at Time of Camp _____ Grade in school as of fall 2017 _____

Have you ever attended this camp before? ___ Yes ___ No

Name of Parent(s) _____

Address _____

Street

City

State

Zip

Phone Numbers Home _____ Work _____

Cell Phone _____ Email Address _____

Emergency Contact Person _____

Relationship to Child _____

Emergency Contact Person Phone Number _____

Any allergies or special needs? _____ If yes, please list below.

Any special interest? _____ If yes, please list below.

If you would like to pay by debit/credit card complete the following:

Debit/Credit Card Number _____ Expiration Date _____

Name of Cardholder (Please Print) _____

Signature of Cardholder _____