

# 2012 BURR OAK CAMP

755 S. Price Road, St. Louis, MO, 63124, 314/993-4045, ext. 249

## APPLICATION FOR ENROLLMENT

Please complete *one application form per child* and return with check or money order made payable to Burr Oak Camp. For additional applications, see the Burr Oak pages on the Burroughs website ([www.jburroughs.org](http://www.jburroughs.org)).

**Enrollment Terms:** Please check the session or sessions desired. **Applications require payment of \$430.00 and a \$30.00 non-refundable deposit for each additional session.** For multiple sessions, **the balance of the payment is due by the first day of that session.**

Child's Name \_\_\_\_\_ Gender \_\_\_\_\_  
Last Name First Name

Age as of June 4, 2012 \_\_\_\_\_ Birthdate \_\_\_\_\_ Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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

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

E-Mail Address (for billing purposes only) \_\_\_\_\_

Mother's Name \_\_\_\_\_ Alternate Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Father's Name \_\_\_\_\_ Alternate Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Check grade student will have **completed** in June 2012.

Nursery/  
Pre-Kindergarten  Kindergarten  1  2  3  4  5  6 (CIT)

Preschool/School Last Attended \_\_\_\_\_

If possible, place my child with (friend's name) \_\_\_\_\_

**FIRST SESSION**  
June 4 through June 15  
\$430.00

**SECOND SESSION**  
June 18 through June 29  
\$430.00

**THIRD SESSION**  
July 2 through July 13  
(No camp on July 4)  
\$430.00

**AM Extended Day**  
\$75.00 (begins at 7:30 a.m.)

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**PM Extended Day**  
\$125.00 (3 to 5:30 p.m.)

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\$125.00 (3 to 5:30 p.m.)

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\$125.00 (3 to 5:30 p.m.)

Total \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

Total \$ \_\_\_\_\_

*See reverse side*

## TRANSPORTATION/MEDICAL RELEASE

Burr Oak Camp has my permission to transport my child between the Community School campus and the John Burroughs School campus.

I do hereby grant permission to Burr Oak Camp, John Burroughs School, Community School and their respective agents and employees to secure such medical aid and hospital services as they deem necessary for the child noted on this application form in the event he/she should sustain an injury or illness while attending Burr Oak Camp. I have also indicated below any medical information of which the camp should be aware in consideration of the child's physical and mental well-being.

\_\_\_\_\_  
Parent's Signature

Child's Name \_\_\_\_\_

Pediatrician \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Dentist \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Hospital Preference \_\_\_\_\_

Person (other than parent) to contact in emergency \_\_\_\_\_ Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Does your child have any health problems, including allergies (specify) \_\_\_\_\_  
\_\_\_\_\_

### Photography

A photographer will take pictures of Burr Oak Camp activities for next year's brochure and for advertising purposes. Children will not be identified. **Parents who do not want their child's photograph to be used for these purposes should contact Skippy Keefer, the camp director, in writing before the child's first day of camp (Skippy Keefer, John Burroughs School, 755 South Price Road, St. Louis, MO 63124).**

### Electives\*

To be filled out only by campers who have completed 4th, 5th or 6th grade

Indicate your top five choices in order of preference by number (1, 2, 3, 4 and 5). Each camper will be assigned three electives.

Archery \_\_\_\_\_ Jewelry Making \_\_\_\_\_ Tennis \_\_\_\_\_

Cooking \_\_\_\_\_ Hip-Hop \_\_\_\_\_ Track & Field \_\_\_\_\_

Court Sports \_\_\_\_\_ Lacrosse \_\_\_\_\_ Video Making \_\_\_\_\_

Field Games \_\_\_\_\_ Showtime \_\_\_\_\_ Woodworking \_\_\_\_\_

\*Availability dependent on the number of campers interested