

Tinker Camp
R.W. Norton Art Gallery Camp Application
July 19 - July 29, 2016
8:00 am- 12:00 pm
Tuesday-Friday (No Mondays)

Child's Name _____

Address _____

City _____ Zip Code _____

Current School _____ Grade _____

Contact Information:

Name of the person with whom child lives _____

Relationship to child _____

Parent/Guardian's Telephone Number (work) _____

Home _____ Cell _____

E-Mail _____

Alternate Contact:

Name _____

Phone Number _____

OFFICE USE ONLY:

Date Application Received: _____

Admitted: _____ *Wait Listed:* _____ *Number:* _____

Date of Phone Call Contact: _____

Date of Admittance Letter Mailed: _____