Summer Fun Camp 2014												
Leader(s):	Contact Number:											
					С	ontac	t Ema	ail:				
Title of Camp:												
Days, Dates, & Time(s):												
	Su M 1 2 8 9 15 16	<b>Jun</b> Tu 3 10 17 24 2	tes  Verification of the second of the secon	F 6 13 20	21						AM PM (	ime (8:30-12) (12:30-4) Day (8:30-4)
Entering Grades:	□PK	□K	□1	□2	□3	□4	□5	□6	□7	□8	□9-10	□11-12
Camp Objective:												
Full Camp Description:												
Supplies/Equipment to be furnished by school:												
Campers will need to bring:												
Class Capacity:												
Transportation Needed:												
Other Notes:												
Completed by School												
Camp Code:												
Specific Location:												
Cost per camper:												

For questions or further information, please contact:

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