

# 2011 CAMP HIGHLANDS ENROLLMENT



Please indicate which term your son will attend.

- |                                      |                     |        |
|--------------------------------------|---------------------|--------|
| <input type="checkbox"/> Three Weeks | June 26 – July 16   | \$2775 |
| <input type="checkbox"/> Four Weeks  | July 17 – August 13 | \$3700 |
| <input type="checkbox"/> Seven Weeks | June 26 – August 13 | \$5775 |

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

Mother's Name: \_\_\_\_\_

Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Telephone: \_\_\_\_\_

Mom's Cell: \_\_\_\_\_

Dad's Cell: \_\_\_\_\_

Parent's e-mail (required): \_\_\_\_\_

Child's Date of Birth: \_\_\_\_\_

Grade Completed by June 2011: \_\_\_\_\_

Lives with:  Both Parents  Mother  Father

How did you hear about camp?  Website  Word of mouth. By Whom? \_\_\_\_\_

Other \_\_\_\_\_

To enroll your son for the 2011 camping season, please send this completed form with a \$500 refundable deposit to:

Winter address:

Camp Highlands  
4146 Lawn Ave.  
Western Springs, IL 60558  
1-800-868-3398

Summer address:

Camp Highlands  
8450 Camp Highlands Rd.  
Sayner, WI 54560  
1-715-542-3443