

# Camp Registration Form

Mail to: Art Alliance, P.O. Box 811,  
Lemont, PA 16851  
or call 234-2740 to register with  
Visa or MasterCard

CHILD'S NAME

AGE

PARENTS

STREET ADDRESS

EMAIL ADDRESS

CITY

ZIP CODE

HOME PHONE NUMBER

CELL

- |  |       |
|--|-------|
| <input type="checkbox"/> Garden Art                  | \$130 |
| <input type="checkbox"/> Monsters & Wild Things      | \$130 |
| <input type="checkbox"/> Mosaics                     | \$145 |
| <input type="checkbox"/> 3D Paint Studio - morning   | \$135 |
| <input type="checkbox"/> 3D Paint Studio - afternoon | \$135 |
| <input type="checkbox"/> Make a Masterpiece          | \$130 |
| <input type="checkbox"/> Comics - morning            | \$135 |
| <input type="checkbox"/> Comics - afternoon          | \$135 |
| <input type="checkbox"/> Puppets                     | \$130 |
| <input type="checkbox"/> Mural Project               | \$140 |
| <input type="checkbox"/> Beach Week                  | \$130 |
| <input type="checkbox"/> Celebrate Worldwide         | \$130 |
| <input type="checkbox"/> Folk Art                    | \$130 |
| <input type="checkbox"/> Clay & Textiles             | \$130 |
| <input type="checkbox"/> Time Travelers              | \$130 |
| <input type="checkbox"/> Name that Camp              | \$130 |

ALLERGIES? \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_

Checks to "Art Alliance"  
OR  
Visa/MasterCard by mail or phone

Card # \_\_\_\_\_

Expiry \_\_\_\_ / \_\_\_\_ 3 digit code \_\_\_\_\_