

# 2009 Hawk Rowing Camp

## CAMPER INFORMATION

First Name \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

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

Home Phone: \_\_\_\_\_

School Currently Attending: \_\_\_\_\_

Gender: M \_\_\_ F \_\_\_ *SJP Pre-8<sup>th</sup> program attendee:* Yes / No  
Current Grade \_\_\_\_\_ (please circle)  
Current Age: \_\_\_\_\_

## PARENT INFORMATION

Mother's Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

Father's Name: First: \_\_\_\_\_ Last: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_

Mother's work # \_\_\_\_\_ Cell # \_\_\_\_\_

Father's work # \_\_\_\_\_ Cell # \_\_\_\_\_

## SESSION INFORMATION

**Session One: Monday, June 29<sup>th</sup> to Friday, July 10<sup>th</sup> (No camp July 3<sup>rd</sup>)**  
(No camp on Friday, July 3<sup>rd</sup>)

**Session Two: Tuesday, July 14<sup>th</sup> to Friday, July 24<sup>th</sup>**  
Time: 1:00 p.m. to 5:00 p.m.

*Camp is not in session during the weekends*

*A non-refundable deposit of \$100.00 is required in order to reserve a place in the session. Reservations are made on a first come, first serve basis and are limited to 100 campers per session. Session total is \$500.00. Balance is due June 15th.*

**SEND TO: HAWK ROWING CAMP:**

**C/O Dan Kilpatrick**

**1733 West Girard Avenue**

**Philadelphia, Pa. 19130**

**Checks Payable to: HAWK ROWING**

**FOR MORE INFORMATION: WWW.SJPREP.ORG/HRC**

**Administrative use only:** Deposit/check # \_\_\_\_\_ Session #1 \_\_\_\_\_ Session #2: Check # \_\_\_\_\_

Name on check: \_\_\_\_\_ Address \_\_\_\_\_

(If different than above)