MID-CAPE HOOP SCHOOL Since 1986
CREAMERY IN BUTLER by Evon
~ Application Form - 2024 ~
<u>Session 1</u> – Monday, July 8th – Friday, July 12th at Monomoy Regional High School <u>Session 2</u> – Monday, July 15th – Friday July 19th at Monomoy Regional High School <u>Session 3</u> – Monday, July 22nd – Friday, July 26th at DY Regional High School <u>Session 4</u> – Monday, July 29th – Friday, August 2nd at DY Regional High School
Full Day 8:30am - 2:30pm - <mark>\$450</mark> ~~~ ~ Half-Day 8:30am - 12 Noon - <mark>\$370</mark>
FRIDAYS each week are a Half-Day for all Campers " Dismissal is at 12:30 after our Lunch/Cape Cod Creamery Ice Cream Celebration
Please Check one - <mark>Session 1</mark> <mark>Session 2</mark> <mark>Session 3</mark> <mark>Session 4</mark>
FULL DAY or HALF-DAY
Name Male Female
Email Address
Mailing AddressCityCityCity
State Phone
Emergency Phone Insurance Carrier
T-Shirt Size

Please enroll my son/daughter in your Mid-Cape Hoop School. I understand that the Monomoy Regional & DY Regional School Districts, Mid-Cape Hoop School co-directors, staff or anyone associated with this camp will not assume responsibility for accidents and/or medical/dental expenses incurred as a result of participation in this program. The applicant is covered by our family insurance, is in good health and able to participate in the physical activity of a vigorous program. I hereby authorize the camp directors to act for me according to their best judgment in any emergency requiring medical attention.

Parent's Signature \_\_\_\_\_

Date \_\_\_\_\_

Please mail this form & your <u>non-refundable</u> deposit of \$100 payable to: Mid-Cape Hoop School – c/o Bob Hamilton 40 Sheffield Road – West Yarmouth, MA 02673 <u>rhamilton08@comcast.net</u> or <u>suzham19@gmail.com</u> – 508-394-4039

## **Build Your Future on a Firm Foundation**