



# Discovery Day 2020

Lake of the Woods and Greenwoods Camp

Saturday, August 8th

## Family Information

Attending Parent's Name(s): \_\_\_\_\_

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

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

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

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

## Child Information

Name: \_\_\_\_\_ Gender: \_\_\_\_\_

T-Shirt Size: \_\_\_\_\_ Birth Date (MM/DD/YYYY): \_\_\_\_\_

Name of School: \_\_\_\_\_ Grade this Fall: (Sept. 2020) \_\_\_\_\_

Session of Interest:

2-Weeks

4-Weeks

Not Sure Yet

How did you hear about us?

Does your child or anyone attending Discovery Day have any allergies or dietary restrictions we should be aware of?

Please email your completed form to [keely@Lwcgwc.com](mailto:keely@Lwcgwc.com)