



The Arc Mid-South

Summer Camp Registration Form

June 8– 11, 2017
*Nelson Woods
Retreat Center
Millington, TN*

July 27– 31, 2017
*Pinecrest
Retreat Center
Moscow, TN*

Camper's Last Name **Camper's First Name** **Camper's Middle Initial**

Age **Birthday**

Street Address

City **State** **Zip Code**

Parent's or Guardian's Full Name

Home Phone Number (including area code) **Work Phone Number** **Cell**

Disability Diagnosis

Does your child/relative have seizures? Yes No (if yes, please complete a seizure form for our records)

Does your child/relative use a wheelchair? Yes No

Bring in or mail application and \$50 non-refundable deposit to:

The Arc Mid-South
3485 Poplar Ave. Suite 210
Memphis, TN 38111

NOTE: The physician's report (physical) must be completed by a doctor.