

Please use a separate form for each camper.

2013 Registration Form

Operation: Military Kids Summer Camp

at Niagara Falls Air Reserve Station
August 12-16th



Camper Name: _____ Male Female

Birthdate: _____ Age at date of Camp: _____ Entering grade: _____

Is camper a 4-H Member? Y N T-Shirt Size (Adult Sizes): S M L XL

Parent/Guardian Name: _____

Phone:(____) _____ Email: _____

Mailing address: _____

City: _____ State: _____ Zip: _____

County: _____ Family member in the military: _____

Branch of service: _____ Veteran Reserve Fallen Warrior National Guard Wounded Warrior Rank: _____

Where do you live? _____ Ethnic background (optional) _____
___ Farm ___ Rural ___ Village ___ City

How did you hear about the camp? _____

Other Operation: Military Kids activities previously attended: _____

Please return registration form with payment (\$25 per camper, non-refundable) by 8/1/13 to:

**Attn: Megan Miller
Cornell Cooperative Extension
203 N. Hamilton St
Watertown, NY 13601**

For more information contact Megan at (315) 788-8450, ext. 254 or mbm243@cornell.edu.

Once registration form and payment are received, a confirmation packet will be sent to you.

Please notify Megan (contact info above) immediately if you need to cancel after registering.

Cornell Cooperative Extension Association of Jefferson County provides equal program and employment opportunities.
Please contact the Cornell Cooperative Extension Association of Jefferson County office if you have special needs or are unable to pay.