JAIN CENTER OF SOUTH FLORIDA

A NON-PROFIT TAX EXEMPT ORGANIZATION
UNDER IRS CODE 501(C) (3)-.E.J. # 65-0448730
(Donations are tax Deductible)

LIVE AND LET LIVE

1960 N. Commerce Parkway #11-12
Weston, FL 33326
954- 349- 4940

Spiritual Camp Form:

Parents Name: _____
First Middle Last

Address: _____
Number Street Apt#

City: _____ State: _____ ZIP: _____

Home Phone: _____

Cell: _____ _____

Email Address: _____

Camp Dates : 27-31 JULY 2015

Camp Dues: $75 per Child(Member**)**
Camp Dues: $100 per Child(Non-member**)**

Please List the children attending the Spiritual Camp below,

Name	**Age**	**T-Shirt Size(Kids S/M/L)**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Note : Snacks and lunch will be provided. **Camp Time : 8:30AM-4:00PM.**

Allergies : _____ (Food, other)
Medication : _____ (If needed to be administered at camp)

Date Received: _____