



EAA 690 Aviation Camp 2019 Enrollment Form

**Aviation Camp
June 10 – 14, 2019**

**Alpha/Bravo/Charlie
(Circle One Please)**

I. Camper Data

Camper's Name: _____
(Last) (First) (Middle Initial)

Address: _____
(Number & Street) (Apt. #)

City: _____ State: _____ Zip Code: _____

Home Telephone: _____ Age: _____ Gender: ___ Female ___ Male

Camper's Date of Birth: ____/____/____

II. Auxiliary Data

Grade (next year): ____ School District: _____ School Name: _____

Has the camper participated in other aviation camps previously? _____ No _____ Yes

If so, please list: _____

III. Special Conditions: Please List

1. Any known health problems (such as allergies, diabetes, heart trouble, epilepsy or asthma, etc...)

2. Any invisible disabilities, such as dyslexia, or any special learning needs

3. Any physical activity restrictions _____

4. Any food restrictions _____

5. Any religious restrictions impacting emergencies or health care situations _____

6. Any other special accommodations needed _____

7. Any medications which must be administered _____

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IV. In Case of Emergency (Please choose either 1. OR 2. and complete 3., sign as appropriate)

1. Consent **is granted** to the staff of EAA Chapter 690 to provide medical services through the appropriate medical facilities and/or medical services to:

(Camper Name): _____, throughout my child's participation in the Aviation Camp.

(Signature of Parent or Guardian)

(Date)

OR 2. Consent **is not granted** to the staff of EAA Chapter 690 to provide medical services through the appropriate medical facilities and/or medical services to: (Camper Name) _____

(Signature of Parent or Guardian)

(Date)

3. Emergency contact (***other than parent***): _____
(First and Last Name) (Relationship to Camper)

Home Telephone: _____ Daytime or Cell Phone: _____

(Camper Name): _____, throughout my child's participation in the Aviation Camp.

(Signature of Parent or Guardian)

(Date)

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VI. Payment and Application Process:

Applications and payment of \$300 per camper for Camp Alpha (for first time attendees), \$300 for Camp Bravo (for those who have completed Camp Alpha), \$375 for Camp Charlie, must be received by May 1, 2019. Payment includes nonrefundable \$50 registration fee.

Students applying to Camp Charlie should include a handwritten statement of any personal experience with aviation, as well as any interest in pursuing aviation with this application.

Make check payable to EAA Chapter 690 and write name of camper on check. Mail application and check to:

Aviation Camp
EAA Chapter 690
4020 Whispering Pines Trail NW
Conyers, GA 30012-6308
770-630-8567 (Registrar)
summercamp@eaa690.net
www.eaa690.org

Deposit and Camp Balance can be paid online by going to: <http://www.mkt.com/eaa690>

Scroll down the Summer Camp section and select Alpha, Bravo or Charlie and then Deposit or Balance.