



Summer Program 2010 Sign-up Form

Student's Name: _____

Date of birth: _____ Shorts size _____ T-shirt size _____

Parent's Name (s): _____

Address: _____

City, State Zip: _____

Telephone: _____

Emergency Contact info: _____

Email address: _____

Does your child have Health Insurance?: (circle) Yes or No

List Allergies or Any physical limitations? _____

Junior Lifeguards: June 7-July 23 M-F \$375- 6 week session (8:30am to 12:00pm)

"School of Skills" Basketball Camp: June 14th- 17th M-TH \$85 (9:00-4:00pm)

Surfing Academy: June 14- July 23 M-F \$225 weekly/ \$79 daily (8:30am-12:30pm)

Legacy Art Summer Camp at Art on Fifth: June 1st- July 30th to register and/ or for more information please call Karen @ 321-724-4490.

My Legacy Memorial Charity Golf Tournament: June 19th 1pm, \$100 per player

Amount due: _____

Please sign and date: _____

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Please send and/or make checks payable to :

Legacy Sports & Life Skills

Po Box 34096; Indialantic, FL 32903

321-208-2577

legacysportsandlifeskills@gmail.com