

Registration Form for Summer Camp

Student's Name _____

Address _____

Contact number _____

Email _____

Parent/Guardian Name _____

Class Name _____ **Camp Date** _____

Payment due one week before camp begins. Checks may be mailed or dropped by Acworth Gallery, 4531 Lemon Street, Historic Acworth GA (across from Lacey's Drugstore). Please contact Lovona for more information - 678-401-6668 or 770-3133-2917 or lovona@gmail.com