

**JACKSON PREPARATORY SCHOOL**  
**Post Office Box 4940**  
**Jackson, MS 39296-4940**

**2008 SUMMER CAMP/WORKSHOP REGISTRATION**

Student's Name \_\_\_\_\_ Gender \_\_\_\_\_

Address: Street \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Parents \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent Business/Cell Phone \_\_\_\_\_

School attended 2007-2008 \_\_\_\_\_ Entering Grade in Fall 2008 \_\_\_\_\_

If either parent attended Prep, list which one(s) here: \_\_\_\_\_

**\*\*IN ORDER TO RESERVE A PLACE IN ANY CAMP, THE FULL PAYMENT AND A COMPLETED REGISTRATION FORM MUST BE RECEIVED BY THE SCHOOL!! Please check the camps that you plan to attend.\*\***

		<b><u>ENTERING GRADES</u></b>	<b><u>DATES</u></b>	<b><u>TIME</u></b>	<b><u>COST</u></b>
_____	Chess Clinic	4 <sup>th</sup> -12 <sup>th</sup>	June 2-5	8:30-11:00	\$100
_____	Desktop Publishing	3 <sup>rd</sup> -6 <sup>th</sup>	June 16-20	8:30-11:30	\$100
_____	Junior Robotics Club	5 <sup>th</sup> -8 <sup>th</sup>	June 23-27	1:00-4:00 p.m.	\$130
_____	Math Counts	6 <sup>th</sup> -8 <sup>th</sup>	June 23-27	1:00-3:30 p.m.	\$125
_____	Study Skills Workshop	7 <sup>th</sup>	June 23-27	1:00-3:30 p.m.	\$150
_____	Study Skills Workshop	7 <sup>th</sup>	July 7-11	1:00-3:30 p.m.	\$150
_____	Art Camp	1 <sup>st</sup>	June 23-27	8:30-11:30	\$135
_____	Art Camp	2 <sup>nd</sup> -3 <sup>rd</sup>	June 9-13	8:30-11:30	\$135
_____	Art Camp	2 <sup>nd</sup> -3 <sup>rd</sup>	June 23-27	1:00-4:00 p.m.	\$135
_____	Art Camp	2 <sup>nd</sup> -3 <sup>rd</sup>	July 14-18	8:30-11:30	\$135
_____	Art Camp	4 <sup>th</sup> -6 <sup>th</sup>	June 9-13	1:00-4:00 p.m.	\$135
_____	Art Camp	4 <sup>th</sup> -6 <sup>th</sup>	July 14-18	1:00-4:00 p.m.	\$135
_____	Art Camp	5 <sup>th</sup> -8 <sup>th</sup>	July 21-25	9:00-12:00	\$135
_____	Basic Sewing	5 <sup>th</sup> -8 <sup>th</sup>	June 23-27	9:00-12:00	\$150
_____	Jewelry Workshop	7 <sup>th</sup> -all ages	June 2-6	2:00-4:00 p.m.	\$125
_____	Summer Musical Theater Camp	2 <sup>nd</sup> -6 <sup>th</sup>	June 9-13	1:00-4:00 p.m.	\$100

		<u>GRADES</u>	<u>DATES</u>	<u>TIME</u>	<u>COST</u>
_____	Baseball Camp	1 <sup>st</sup> -8 <sup>th</sup>	June 2-6	8:30-12:00	\$80
_____	Little Patriot Baseball Camp	Ages 4-6 years	June 9-10	9:00-11:00	\$30
_____	Basketball Camp - Boys	1 <sup>st</sup> -6 <sup>th</sup>	June 16-19	9:00-12:00	\$80
_____	Basketball Camp - Boys	7 <sup>th</sup> -9 <sup>th</sup>	June 16-19	1:00-4:00 p.m.	\$80
_____	Shooting Camp - Boys	4 <sup>th</sup> -9 <sup>th</sup>	June 5-6	1:00-4:00 p.m.	\$35
_____	Basketball Camp - Girls	4 <sup>th</sup> -6 <sup>th</sup>	June 9-12	9:00-12:00	\$80
_____	Basketball Camp - Girls	7 <sup>th</sup> -9 <sup>th</sup>	June 9-12	1:00-4:00 p.m.	\$80
_____	Cheerleading Camp	1 <sup>st</sup> -6 <sup>th</sup>	July 7-10	9:00-11:30	\$100
_____	Fast-Pitch Skills Camp	2 <sup>nd</sup> -9 <sup>th</sup>	June 16-19	9:00-12:00	\$85
_____	Football Camp	4 <sup>th</sup> -9 <sup>th</sup>	July 7-10	8:30-12:00	\$80
_____	Soccer Camp (Session I)	1 <sup>st</sup> -6 <sup>th</sup>	July 14-17	3:00-5:00 p.m.	\$85
_____	Soccer Camp (Session II)	7 <sup>th</sup> -9 <sup>th</sup>	July 14-17	9:00-11:00	\$85
_____	Attacking Skills Soccer Camp	5 <sup>th</sup> -9 <sup>th</sup>	July 7-9	4:00-6:00 p.m.	\$45

**\*\*All participants in the athletic camps will receive a T-shirt! Please write what size your child/children will need, making sure to designate YOUTH or ADULT sizes.\*\***

Child's Name \_\_\_\_\_ Size \_\_\_\_\_

In case of emergency, contact: Name \_\_\_\_\_ Day Phone # \_\_\_\_\_

Name \_\_\_\_\_ Day Phone # \_\_\_\_\_

I, \_\_\_\_\_ (parent), certify that \_\_\_\_\_ (applicant) is in good health. I further certify, knowing the camp will be under close supervision, that I will not hold Jackson Preparatory School, its faculty, or the directors of the camp responsible for injuries or sickness incurred by my child during the camp.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**RETURN FORM TO:  
Jackson Preparatory School  
ATTN: Cindy Brooks  
Post Office Box 4940  
Jackson, MS 39296-4940**