

Casa Montessori Summer Camp 2023

Child's

Name: _____

Age: _____ **Birthdate:** _____

Allergies: _____

Mother's Name: _____

Phone #: _____

Email: _____

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Father's

Name: _____

Phone #: _____

Email: _____

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Please let us know if you have any academic/social concerns you wish for us to focus on.