

# Camelot Academy Summer Camp Proposal

809 Proctor St. Durham, NC 27707 Phone: (919) 688-3040 Fax: (919) 682-4320

## **Personal Information**

Name: \_\_\_\_\_

Contact Information:

Address - \_\_\_\_\_

City - \_\_\_\_\_ State- \_\_\_\_\_ Zip- \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

## **Summer Camp Proposal**

Summer Camp Title: \_\_\_\_\_

Description of Summer Camp Proposed -

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Your Relevant Training and Experience to offer this program-

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This program is best suited for:

Full Day (9 AM - 3 PM) \_\_\_\_\_ Part Day: \_\_\_\_\_

Prefer AM \_\_\_ PM \_\_\_

Weeks You are Available to run this camp - circle all that apply:

June 14-18

July 19-23

August 9-13

June 21-25

July 26-30

July 12-16

August 2-6

If enrollment warrants would you be interested in running this program in multiple weeks?

Yes No

Age of Prospective Campers (i.e. 8-9 year olds): \_\_\_\_\_

Minimum and Maximum enrollment \_\_\_\_\_

Questions/comments/concerns: \_\_\_\_\_

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Please attach a current resume and at least 3 relevant references.

Fax or mail all back to the address above no later than January 15, 2010.