



**CITY OF
BLOOMINGTON**
PARKS AND RECREATION



Camper's name: _____

<i>Last</i>	<i>First</i>	<i>M.I.</i>
-------------	--------------	-------------

Kid City Summer Camp is held at Allison-Jukebox Community Center, 351 S. Washington St., from 7:30 a.m.—5:30 p.m.

SELECT SESSION	DATES	REGISTRATION FEE in-city/non-city	REGISTRATION AND PAYMENT DUE BY 5 p.m.
<input type="checkbox"/>	May 28–31 <i>No camp May 27.</i>	\$148/\$152	5/20
<input type="checkbox"/>	June 3–7	\$185/\$190	5/28
<input type="checkbox"/>	June 10–14	\$185/\$190	6/3
<input type="checkbox"/>	June 17–21 <i>No camp June 19.</i>	\$148/\$152	6/10
<input type="checkbox"/>	June 24–28	\$185/\$190	6/17
<input type="checkbox"/>	July 1–3 <i>No camp July 4 or 5.</i>	\$111/\$114	6/24
<input type="checkbox"/>	July 8–12	\$185/\$190	7/1
<input type="checkbox"/>	July 15–19	\$185/\$190	7/8
<input type="checkbox"/>	July 22–26	\$185/\$190	7/15
<input type="checkbox"/>	July 29–Aug. 2	\$185/\$190	7/22
<input type="checkbox"/>	July 18 <i>All Camp Parent Night Out</i>	\$35/\$40	7/15
<input type="checkbox"/>	July 25–26 <i>Overnight</i>	\$50/\$55	7/22

Camper's Name: _____

(Last) (First) (M.I.)

**Payment in full is due at time of registration.
Cancellations must be made prior to the
registration deadline to be eligible for partial refund.**

Total due: _____

Method of payment: ☐ check ☐ cash
Check # _____ Total paid \$ _____

To pay with credit card, call the Parks and Recreation department at 812-349-3700.

To complete your registration, deliver this form and payment to the Parks and Recreation office in City Hall, 401 N. Morton St.; or mail the form and payment to Parks and Recreation, PO Box 848, Bloomington, IN 47402. Include the completed health form for your camper if a current health form is not already on file.

Please note:

- Your child **MUST** have a 2024 Health Form on file.
- Late registrations are subject to available space, and a \$40 administrative fee.
- No refunds are issued once session begins.