

Camp Citrus 2011 Application Middle School

*"Where Learning is the
Expectation and Caring is the
Commitment."*

**At the Marine
Science Station**



To be completed by Parent: (Please print or type)

Student's Name:

First Name _____

Last Name _____

Mailing Address:

Street _____

City _____

State _____ Zip Code _____

Parent or Legal Guardian Information:

First Name _____

Last Name _____

Email _____

Home Phone# _____

Work Phone# _____

Cell Phone # _____

Student information:

Student's Gender: Male Female

Present Grade Level _____

School _____

Letter Grade in Science this year _____

Previously attended Camp Citrus: Yes No

T-shirt Size: S M L XL XXL

Mark your 1st and 2nd choice: (use a 1 and 2)

_____ Session 1, June 6-10, 2011

_____ Session 2, June 20-24, 2011

*Students must have completed 6th or 7th grade to participate.



**Student is responsible for sending
completed applications to:**

Marine Science Station

Attn: Cathy Proveaux

12646 West Fort Island Trail

Crystal River, Fl 34429

Email: proveauxc@citrus.k12.fl.us

**All applications must be mailed and
postmarked by March 25, 2011.**

***To provide equal opportunity for all
applicants, faxes will not be accepted.**

My child has my permission to attend Camp Citrus 2011. I understand there is a **\$80** per student charge for meals and I am responsible for providing transportation to and from the Marine Science Station at the beginning and end of camp.

Parent Signature _____ Date _____

** Do not send in the \$80 meal fee with this application. If you are selected to attend Camp Citrus you will receive and official notification letter and that will be when can submit the meal fee.*

