



JOIN UMOJA SUMMER CAMP



UMOJA SUMMER CAMP REGISTRATION FORM

Summer Camp Location: **Versia L. Williams 901 Baurline**
Summer Camp Time: **June 16 thru July 25, 2008 From 9:00a.m. Till 4:00 p.m.**

Name of Student(s) _____

Parent/Guardian _____

Address _____

Phone Number _____ Cell _____

Present School Attending _____

Please list anyone other than Parent/Guardian who will pick up the above student(s)

MEDICAL INFORMATION

Doctor _____ Phone Number _____

Address _____ Please list daily medical needs:

DISCIPLINE CONCERNS

To all Parents UMOJA Staff reserves the right to remove your child from the UMOJA Summer Camp if he is unable to comply with the rules and regulations that have been set in place by the staff. If your child is removed due to discipline issues you will be unable to receive a refund.

Parent Signature _____ Date _____

UMOJA Coordinator Signature _____ Date _____

P O Box 19090 Fort Worth, TX 76119 [**www.umojaftworth.net**](http://www.umojaftworth.net)

President Mr. J. Muhammad 817.773.3121 Vice Mr. A. Muhammad 817.521.8419
Secretary Mr. C. Dukes 817.903.3303

“IT TAKES THE WHOLE VILLAGE TO RAISE A CHILD”