



FCA 2010 Camper Registration Form

Camper Information			
Name:	Camp Name:		
Address:			
City:	State:	Zip:	
Phone:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female		
Parent/Guardian:			
Home Phone:	Work Phone:		
E-mail Address:			
School Information – School You Will Attend In Fall 2010			
School:			
City:	State:	Zip:	
Birth Date:	Grade/Fall of 2010:	Age:	
High School Graduation Year:	Shirt Size:		
Payment Information			
Student Athlete Enrollment Fee.....	\$ _____		
Amount Enclosed.....	\$ _____		
<input type="checkbox"/> CHECK – Make checks payable to: FCA <input type="checkbox"/> CREDIT CARD <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Discover <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa </div>			
Card Holder's Name (Print):			
Card Holder's Address:			
City:	State:	Zip:	
Card Number:	Expiration Date:		
CID:	Signature:		

Please fill out the Camper Registration Form and send with payment to:

Buckeye Border FCA
 310 Francis Drive
 Wauseon, OH 43567