

FCA Camper Registration Form

Camper Information					
Name:		Camp Nam	Camp Name:		
Address:		·			
City:	State:		Zip:		
Phone:		Gender:	□ Male	☐ Female	
Parent/Guardian:					
Home Phone:		Work Phone	Work Phone:		
E-mail Address:					
School Information – School You Will Attend In Fall 2008					
School:					
City: State:			Zip:		
Birth Date: G		Grade/Fall 200	08:	Age:	
High School Graduation Year:		Shirt Size:			
Payment Information					
Student Athlete Enrollment Fee\$					
Amount Enclosed	\$			_	
 □ CHECK – Make checks payable to: FCA □ CREDIT CARD □ Discover □ MasterCard □ Visa 					
_ Disc		-iaster cara	_ VI30		
Card Holder's Name (Print):					
Card Holder's Address:					
City:	State:		Zip:		
Card Number: Exp		Expiration Date	piration Date:		
CID:	Signature:				

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

Buckeye Border FCA 310 Francis Drive Wauseon, OH 43567