



BELHAVEN CAMP

Before and After School Learn & Play Opportunities

*Please only use this form for Belhaven students
Please submit at least one day in advance*

My child will be in Camp. Week of _____
(Please "X" Camp days of attendance)

_____ Mon _____ Tues _____ Wed _____ Thurs _____ Fri

Dismissal Procedure (choose one)

_____ Dismiss my child at _____ (indicate time).
Your child will be permitted to walk home.

_____ I will pick up my child

Child's Name: _____ Homeroom Teacher _____

Please notify the office of any changes in schedule. Please pay in advance.
Make checks payable to Linwood Board of Education



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