



2015 Rowan County Sheriffs Office Youth Leadership Camp Application

Camper Name _____ **Male or Female**
Last First Middle Initial

Parent/Guardian Name: _____
Last First Relationship to camper

Mailing Address _____ **Campers DOB** _____
Month/date/year

City _____ **Zip** _____

Circle campers' grade he/she is currently enrolled in: 5th 6th 7th 8th

Camper T-Shirt Size: _____ Youth Small _____ Youth Medium _____ Youth Large _____ Youth X-Large

Emergency Contact _____ **Phone Number** _____
Please Print – Last, First Name

Camp Session Enrolling For: **Session 1** ___ **Session 2** ___ **Session 3** ___

Session One: July 6th – 10th from 8:00am – 2:00pm

Location: 1st Baptist Church Salisbury
222 N. Fulton Street
Salisbury, NC 28144

Session Two: July 20th – 24th from 8:00am – 2:00 pm

Location: Southeast Middle School
1570 Peeler Rd.
Salisbury, NC 28146

Session Three: August 10th – 14th from 8:00am – 2:00 pm

Location: Mt. Zion UCC
1415 S. Main St.
China Grove, NC 28023

Parent/Guardian Signature _____ **Date** _____