AILEYCAMP CHICAGO 2024 APPLICATION

APPLICANT MUST BE BETWEEN THE AGES OF 11-14

In order to make this opportunity available to all youth in the city of Chicago, there are a limited number of spaces offered to returning applicants.

PLEASE PRINT Complete the entire application in order for your child to be considered.

Applicants Name	Male/Female		Date of Birth		
Street Address	Apt#	City/State	e	Zip	
Parent/Guardian Name			Best Phone		
Parent/Guardian Ema					
Have you participated	d in AileyCamp before?	YES	NO		
Will you be going to	summer school?	YES	NO	UNSURE	
What school are you	attending now?				
If you are not selecte	ed for AileyCamp this sur	nmer, what	will you do ir	nstead?	
_	ation is used to order ca hen listing your child's <u>s</u>	•		SHOE SIZE	
T- SHIRT SIZE	SHORTS SIZE	LE	OTARD (female	e only) TIGHTS (female only)	
Adult: S M L XL	Adult: S M L XL	Ac	dult: S M L :	XL Adult: S M L XL	
	uths of all races. For repeate which best describe			oful to identify the ethnic origin of ou	
African-American ☐ A	Asian-American Latin-	-American 🗖	Caucasian	Native-American Other (specify)	
MY CHILD HAS PERM	MISSION TO APPLY FOR	R AILEYCAN	1P		
Signature of Parent/0	Guardian			 Date	

NON-REFUNDABLE REGISTRATION FEE: \$50

Registration fee is paid once applicant has been accepted into AileyCamp Chicago

Please email completed form to AileyCampChicago1@gmail.com

For more information, please email AileyCampChicago1@gmail.com

Application Deadline May 15th





June 24, 2024 – August 2, 2024 Monday–Friday 8:30am-3:30pm

Maria Saucedo Scholastic Academy 2850 W. 24th Blvd.

For More Information Email:

AileyCampChicago1@gmail.com

\$50 non-refundable registration fee is due upon acceptance into the program

