Partners In Adventure 2021 February "Virtual" Winter Camp Application February 22 through February 26, 2021



Winter "Virtual" camp for young people with diverse abilities ages 7 and up

Camper's Name/Nickname:			
Date of Birth:	Age:	Sex (M/F):	
Parent or Guardian:			
Address:		Town:	Zip:
Home Phone:	Cell Pho	one:	_
Diagnosis of camper:			
Circle	one: New to PIA	Camper registration info on file	
Do you or your camper have a Gm	nail account?		
Gmail address:			
(You will need to establish a Gma		goggle classroom to access the ca	ımp format, we
Are you and/or you camper famil	iar with the Goggle Clas	sroom format? Yes No	
Any special considerations for this	s camper's participation	in this virtual camp experience?	
Parent/Guardian Signature:			
Participation Fee for Winter Camp	•		• •
(There	are no financial scholar	ships available for this experience	<u>e)</u>
Please return this application for	n with payment by Febr	uary 10, 2021 to:	
Sue Minter			
39 Hillside Circle			
Essex, Vt. 05452			

For questions contact: Administrative Assistant Sue Minter, 802-310-0808 or e-mail: sminter@partnersinadventure.org
For more applications visit our website at: www.partnersinadventure.org
No applications accepted by e-mail.