



St. John's Lutheran Church of Orange Summer Camp Change Request Form

Child's Name _____

Grade in **Fall 2018** _____

Parent/Guardian Signature _____

Date _____

Attention Parents:

Please indicate whether you are ADDING a date or DELETING a date by writing "A" on dates to **ADD** and "D" on dates to **DELETE**. *Please note: there is a one week minimum notice to change your program.*

Week	Monday	Tuesday	Wednesday	Thursday	Friday
1 June 4-8	4	5	6	7	8
2 June 11-15	11	12	13	14	15
3 June 18-22	18	19	20	21	22
4 June 25-29	25	26	27	28	29
5 July 2-6	2	3	Closed 4 th of July	5	6
6 July 9-13	9	10	11	12	13
7 July 16-20	17	18	19	20	21
8 July 23-27	23	24	25	26	27
9 July 30-Aug. 3	30	31	Aug 1	2	3
10 Aug. 6-10	6	7	8	9	10