



Southeastern Railway Museum

2010 Summer Camp Sign-UP

Child's Name: _____

Child's Age: _____ Date of Birth: _____ Male/Female

Camp Dates: (circle one) June 21-25 July 12-16

Parent's Name(s): _____

Address: _____

Home Phone # _____ Cell Phone # _____

Work Phone # _____ Cell Phone #2 _____

e-mail address: _____

\$75 Deposit: Paid by ___ Check # _____

___ Credit Card : Visa Master Card

_____ expiration: _____

Signature: _____

Return registration forms to the museum or mail to : Attn: Summer Camp
Southeastern Railway Museum
PO Box 1267
Duluth, GA 30096