APPLICATION for 2023 NEOLS RR CAMP

(Open to 1st time Campers, 10-14 yrs of age)

Name of Camper	Age
Parent(s) name	
Address	
City & Zip	
Phone 1	(cell)
2	(cell)
email 1	2
•	tc. of which the Camp Director should be aware:
Emergency Daytime Contacts	(home &/or cell):
Primary Name:	
Secondary Name:	
NEOLS will be taking video an	d photos for the NEOLS newsletter, promotional
literature and outside venues	(newspapers). If you do not want your child to
appear in these media circle: I	NO
Parent Approval	Date
A \$45 fee will be asked to cov	er cost of supplies and materials and is due upon
registration. Please send payn	nent and completed application form to:
NEOLS c/o John Beck, 2477	South Medina Line Road, Wadsworth, Ohio 44281
Phone: 330-571-4334	