

Camp Pa-Qua-Tuck

Moriches Rotary Health Camp Inc.

P.O. Box 677

Center Moriches, NY 11934

2010 Registration Invoice

Invoice #

Session(s) requested _____

<p><u>Camper=s Name and Address:</u></p> <p><u>Date of Birth:</u></p>	<p><u>Office Use Only:</u></p> <p>Date_____</p> <p>Check #_____</p> <p>Amount_____</p> <p>Balance Due_____</p> <p>Approved_____</p>
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Please attach Registration and Trading Post Fee in the amount of \$685 per session for your child=s 2009 participation at Camp Pa-Qua-Tuck. Checks should be made payable to ***CAMP PA-QUA-TUCK.***

Remember AFirst come, First Served@