



2025 Ages 5 - 16

Return completed application by no later than July 25th along with your check made out to "AAAC" to: AAAC, PO Box 38, Allegan, MI, 49010 Application must be mailed but you may pay with a credit card on our website.

\$20 per day, \$100 per week

Please mark the days your child will be attending.

	Mon	Tues	Wed	Thur	Fri
	Number	of days _	x \$20	=	\$Total
					MATION n to 11:30am
Age	_ DOB:		Entering	<u> </u>	grade in Fall of 2025
Name			Allero	gic to	
Address					
Phone Number					
In case of Em	nergency, cor	ntact:			
NameRelationship					
Address					
Phone numb	oer(s)				
Alternate Name			Phone		
Council spons	ored camps.		cipate in all acti		ted with Allegan Area Arts e camp(s).
Parental/Guardian Signature					Date

For 2024 photos, please go to our website: alleganarts.com and click on the "Classes" heading.