

# **ACMH Youth Leadership Camp 2017**

## APPLICATION

Due Date: August 11<sup>th</sup>, 2017

### Information

**Name** \_\_\_\_\_

**Age** \_\_\_\_\_

**Date of Birth** \_\_\_\_\_

**Street Address** \_\_\_\_\_

**Zip Code** \_\_\_\_\_

**County** \_\_\_\_\_

**Home Phone** \_\_\_\_\_

**Cell Phone** \_\_\_\_\_

**Email** \_\_\_\_\_

### **\*\*Parent/Guardian Information -- If Under 18\*\***

**Name** \_\_\_\_\_

**Contact** \_\_\_\_\_

**Signature** \_\_\_\_\_

