



**Christodora's
Manice Education Center
Camper Application Form 2012**

Please mail or fax this to:
Christodora
One East 53rd Street, NY, NY 10022
Fax: 212-371-2111

Camper Info: Name: _____ Age _____ Date of Birth: ____ / ____ / ____ (check one) Male ____ Female ____ School Name: _____ Current Grade: ____ Partnering Program Name: _____ Camper's Email: _____ Camper Cell Phone: _____	Parent/Guardian Info: Parent/Guardian Name/s: _____ Parent/Guardian Email: _____ Parent/Guardian Home Phone: _____ Parent/Guardian Work/Cell Phone: _____ Primary Language Spoken by Parent/Guardian: _____
Home Address: _____ Street Apt. _____ City State Zip	

Have you participated in any of these Christodora programs? *(Please check all that apply)*

- Winter Ecology Program (educators in your school classroom during the school year)
- 3-day Field Trip to the Manice Education Center with your school
- New Youth Conservationists Weekend Programs at the Bronx Botanical Garden

Do you know anyone who has participated in any of the Christodora programs? (Name/s)

Please answer the follow questions:

1. Why you would like to participate in a program at the Manice Education Center (Manice)? What would you like to learn during your participation in our program? Why?

2. Have you ever been to camp? Where was the camp located? How long was your stay?

3. What would make your Manice experience a memorable one?