BAKER SUMMER DISCOVERY 2010

PAYMENT INFORMATION

Camper 1 Name: _____
Last First

Camper 2 Name: _____
Last First

Camper 3 Name: _____
Last First

Camper 4 Name: _____
Last First

$500 deposit per camper (*due with registration*)

$200 deposit per camper for CIT and BIT program

Total Deposit $_____

Camp Balance $_____
(Your summer selections less deposit)

Extended Care $_____

Balance Due $_____

Payment Method:

☐ **Cash** ☐ **Check** (*payable to Baker Demonstration School)*

☐ **VISA** ☐ **MasterCard** ☐ **American Express**

Account number

Expiration date 3 or 4 digit security code on back of card

Print Name of Cardholder

Billing Address of Credit Card

City State Zip

Cardholder Signature

Credit Card auto pay: Your account will be charged automatically on 4/15/2010 and 5/15/2010

Please return your completed registration and payment forms to:

By fax: 847-425-5801; attention Summer Registration

By mail: Baker Demonstration School
Summer Discovery Program
201 Sheridan Rd.
Wilmette, IL 60091