

Childhood Obesity Task Force



APPLICATION DEADLINE:

August 1, 2008

Date Received: _____

Family Health and Fitness Camp Pre-Registration Form

WHO: Families with an overweight school-age child

WHAT: Weekend camp and follow-up support to promote weight loss, healthy eating, physical fitness

WHERE: Camp Holiday Trails in Charlottesville, Virginia

WHEN: Friday, September 12 – Sunday, September 14, 2008 (6 pm on Friday – Noon on Sunday)

Information about overweight child:

Child Name: _____ Birth Date: _____

Age _____ Gender: M _____ F _____ Height: _____ Weight: _____

Information about other family members attending camp:

Note: At least one parent or adult guardian must accompany children to Family Camp. All family members will sleep in a private cabin that has beds, private bathroom and shower.

Number of adult family members who will attend camp _____

Relationship to child (parent, relative, foster parent, etc.): _____

Number of siblings (brothers and sisters) who will attend camp _____

Family Mailing Address & Phone:

Address: _____

City: _____ State: _____ Zip Code: _____

Home: _____ Office: _____ Cell: _____ E-Mail: _____

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Camp Fee: \$100/person (*Fee includes food, lodging, and activities*) – **Scholarships are available if needed** Fee to be paid upon completion and approval of registration form by September 1, 2008.

Name of person who completed this application: _____

Relationship to applicant: _____

Signature: _____ Phone: _____ Date: _____

Please fax pre-registration form to Barbara Yager, Chair of the Charlottesville Childhood Obesity Task Force at 972-4310.
Or mail to c/o Barbara Yager @ 1138 Rose Hill Drive, Charlottesville, Va. 22903
The family will be contacted to obtain additional information and to complete the registration process.