

## Application for Air Camp 2024 June 17 - June 25

Student Name (Last)		First _			MI
Street					
	ZIP				
Age as of 6-19-24Dat	te of birth			🗆 male	□ female
Adult T-shirt size: □ small	□ medium	□ lar	ge	□ x-large	□ xx-large
Parent/Guardian information					
Name (Last)		_First _		]	MI
Street					
City/Town	ZIP				
Phone: HomeWo	ork	e-mail			
Applicant's Aviation Experience experiences in which you have part Personal Essay: On the back of this you would be a good member of A	ticipated in the	ne last tv	vo year	s. Use back	if necessary.
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Personal Essay: On the back of this you would be a good member of A Applicant's Self-Rating: Please honestly rate yourself in each	is application ir Camp.	ne last two	tell us i	n 50 words	or less why
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Each application must include a refundable \$100 deposit, credited toward tuition of \$395. Priority will be given to applications postmarked by May 15<sup>th</sup>. After that date additional new applications will be considered on a space available basis.

Please make checks payable to <u>EAA 1158 Air Camp</u>. Mail check with application to: Air Camp Registration, c/o Mike Harrington W68 N173 Evergreen Blvd, Cedarburg WI 53012.