

MFS SUMMER ADVENTURES CAMP FAIR

Saturday, February 6, 2010

Directory Form

NAME OF PROGRAM (specify as you wish to be listed in Camp Fair Directory):

AGES (OF PARTICIPANTS) _____

DESCRIPTION (check as many as necessary):

Day programs Boys Day _____
 Girls Day _____
 Coed Day _____

Residential programs Boys residential _____
 Girls residential _____
 Coed residential _____

Type Traditional _____
 Adventure _____
 Academic/Cultural _____
 Sports _____
 Teen travel _____

 Handicapped
 accessible? _____

CONTACT PERSON: _____

OFF-SEASON ADDRESS: _____

OFF-SEASON TELEPHONE NUMBER: _____

OFF-SEASON FAX NUMBER: _____

SUMMER ADDRESS: _____

SUMMER TELEPHONE NUMBER: _____

SUMMER FAX NUMBER: _____

E-MAIL ADDRESS: _____

WEBSITE: _____

Which address is preferred to receive MFS Camp Fair information? (please circle one)

Off-Season

Summer

PLEASE WRITE A BRIEF SUMMARY TO BE PUBLISHED IN OUR CAMP FAIR DIRECTORY.
(Please do not send brochures, as we are limited on space.)

If you would like to email your description, you may send it by December 11th to Matt Nierenberg,
Director of Parent & Alumni Programs at mnierenberg@mfriends.org