

LOVE TO SING DAY CAMP COUNSELOR IN TRAINING REGISTRATION FORM 2025

Print out this form and mail to Love to Sing, 4571 Merrick Road,
Massapequa, NY 11758

OR call/text Jeanne Marino at 516-884-4000 and she will fill it out for you

CIT'S Name _____ Age _____

Address _____ Cell # _____

Date of Birth _____ Grade entering 9/25 _____

Parent's name _____

Email address _____

Cell # _____ Additional Cell # _____

Check which sessions the CIT will attend:

_____ Session 1: Mon June 30-Wed July 3

_____ Session 2: Mon July 7 -Fri July 11

_____ Session 3: Mon July 14 -Fri July 18

_____ Session 4: Mon July 21-Fri July 25

_____ Session 5: Mon July 28- Fri Aug 1

Pricing

of sessions X \$240 = _____ (Subtract \$44 for Session 1)

Lunch add on \$50/week _____ (subtract \$10 for Session 1)

TOTAL _____

Make checks payable to Love to Sing, use credit card or Venmo @Mark-marino-22 (confirmation 6704)

All fees paid are non-refundable.

Card

_____ Exp _____ CVC _____

