



# Summer Experience Application

## PARENT/GUARDIAN INFORMATION (Please Print)

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

EMERGENCY CONTACT AND PHONE #  
\_\_\_\_\_

## APPLICANT INFORMATION (Please Print)

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

BIRTH DATE: \_\_/\_\_/\_\_ AGE: \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

ADULT SHIRT SIZE: S M L XL XXL (Circle one)

## THIS APPLICATION MUST BE COMPLETE

### OR IT WILL BE RETURNED

This completed camp application form AND a one to three page essay, written by the applicant, must be received by the

Aviation Education Foundation of Colorado, Inc, by Monday, May 19th.

Applicants must be within the age range on the first day of camp .

Please send to

Aviation Education Foundation of Colorado, Inc.  
8340 Cessna Drive  
Peyton, CO 80831

Contact: Richard Martin 719-683-6587 or Hank Bartlett 719-594-9524

*Submit Application with Essay*

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## Signatures

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

**Signatures by applicant and parents and/or guardian are required.  
ALL applications are subject to the selection process and  
maximum capacities of the program.**

**Upon acceptance,  
a packet of information including:  
*Permission to Participate, Liability Waiver,  
Release & Indemnification,  
Health Form, Travel Form and  
other pertinent information* will be sent to you.  
Bring completed forms to the Orientation on June 17, 2008**

**For more information contact Richard Martin, 719-683-6587.**

*Submit Application with Essay*