

**Tri-County Sewing Camp
June 23, 2016
Sidney, MT**

NAME: _____

ADDRESS: _____

HOME PHONE: _____ **COUNTY:** _____

AGE: _____ **YEAR IN SEWING PROJECT:** _____

PLEASE CHECK IF YOU ARE ABLE TO BRING: _____ Sewing Machine

NAME OF ADULT CHAPERONE (minors must list an adult who is responsible for he/she if not accompanied by parent)

Adult Registration

Adults are encouraged to take part in all or part of camp. We can always use extra help with food, workshop and chaperoning duties. We would appreciate all adults who plan on attending camp to please fill out the form below so we know how many to plan for.

NAME: _____ **PHONE #:** _____

Return this form and the medical release form, along with a \$10.00 registration fee for members and \$5.00 for adults by June 10th to the Richland County Extension Office, 1499 North Central Avenue, Sidney, MT 59270.