



Star Hill Family Athletic Center Summer Recreation Program

2023 Registration Change Form

Camper's Name(s) _____

I am requesting a change to the following week(s):

I am requesting that the registration for the week(s) listed above be:

- Added
- Cancelled
- Changed to (fill in dates) _____

Be Considered as a Vacation Week/Days
Star Hill Staff - # of Vacation Days Planned _____

Other (Please Explain) _____

Star Hill Staff Use Only (Please staple to original registration form)

Date that Change Form was Received _____

Changes made to EZ Facility (initial & date) _____

Fee Changes (explain) _____

Camp Director's Approval *Date* _____