

K i c k i n g B e a r  
**CAMP FOR KIDS** 

www.kbil-camp.org

Child's Name: \_\_\_\_\_ Child's Age: \_\_\_\_\_

Name of Parent (Guardian): \_\_\_\_\_

Address of Parent (Guardian): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone # of Parent (Guardian): ( \_\_\_\_\_ ) \_\_\_\_\_

Parent (Guardian) Signature: \_\_\_\_\_

(Circle one) Youth Shirt Size - Small Medium Large

Adult Shirt Size - Small Medium Large X-Large

Will you be providing your own Tent Yes / No

Do you need a Tent provided Yes / No

**Please mail-completed form to:**

**Mark Thompson  
803 W. Anthony Dr.  
Champaign, IL 61822**



**Make A Difference In  
A Kid's Life.**

**Help KICKING BEAR One-On-One succeed.**