

Please mail this form and your check to:
Children's Oncology Camping Association, International
261 Magnolia Crest
Dadeville, Alabama 36853

	Please PRINT all information clearly		
Date:			
Enclosed is my check in the amount of \$_			payable to:
	Children's Oncolog	gy Camping Associati	on, International
My name:			
Address:			
City/State/ZIP			
Home phone:		Email:	
(Receipt will be	sent to the address above.)		
Send acknowle	dgement card to:		
My name:			
Address:			
City/State/ZIP			
How would you I	ike the card to be signed? _	(name or names)	

We thank you for your gracious support.