Camp Tapawingo

DIRECTOR: JANE A. LICHTMAN

PARENT SUMMER TRAVEL PLANS

If you will be traveling this summer,
please complete and return this form as soon as possible.

CAMPER NAME: _____

PARENT NAME: _____

Our travel itinerary will be as follows:

From	To	Destination	Phone Numbers

If you have a printed itinerary of your travel plans, please send us a copy.

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