# Camp Weevil

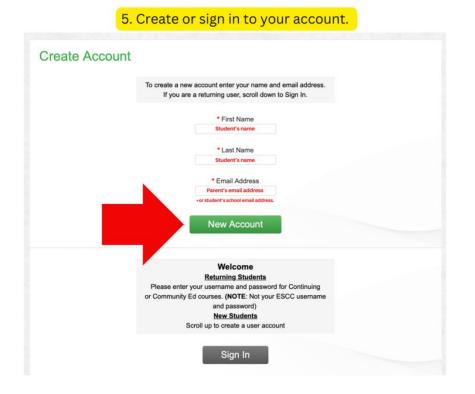
### HOW TO REGISTER YOUR CAMPER (STEP-BY-STEP)

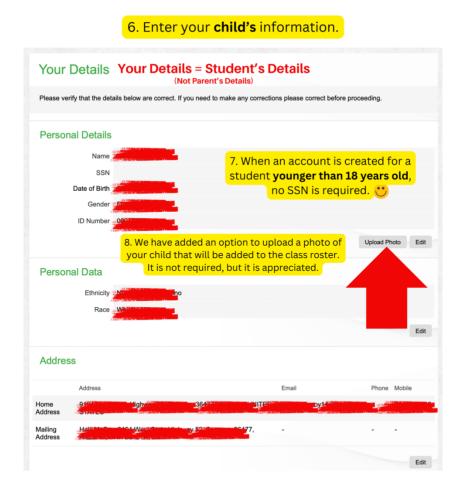
## Find your child's desired class bundle. Be sure to choose the correct age group. (2nd and 3rd, 4th and 5th, or 6th and 7th)

ENTERPRISE STA				Search 🤆 1
	С	ourse Registration		
			row(s)	1 - 15 of 18 😏
NC Action Athletes 2 & 3 (NCMP-5	041)			
2nd and 3rd Grade		2. Click Add to Cart.		
				\$175.00
Start date         06/24/2024           End date         06/27/2024	Location	Enterprise Campus	Add to	o Cart
NC Action Athletes 4 & 5 (NCMP-5	041)			
4th and 5th Grade				
· ·				
Start date 06/24/2024	Location	Enterprise Campus		\$175.00
End date 06/27/2024			Add te	o Cart
NC Action Athletes 6 & 7 (NCMP-5	041)			
6th and 7th Grade				
-				



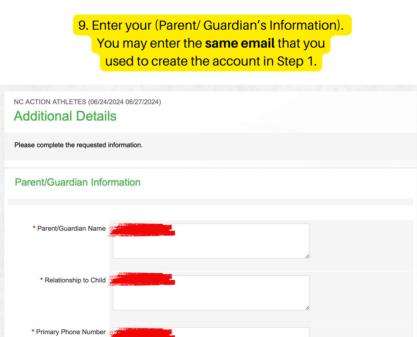






#### If you choose to upload a photo, any clear photo (jpeg or png) will be fine. We do not expect a valid Photo ID or drivers license.

Photo Uploa	ad
Any photo should be a	hoto ID or drivers license. professional and legal picture of you. ile image should be a head shot of you in front of a solid background, should not be smaller than 200 pixels in
	<ul> <li>File</li> <li>File format is not supported.</li> <li>Upload</li> </ul>
Previous	Save & Exit Next

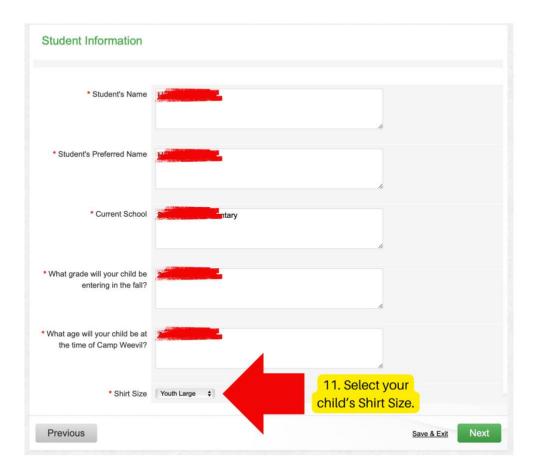


ail.com

\* Work/Secondary Phone Number

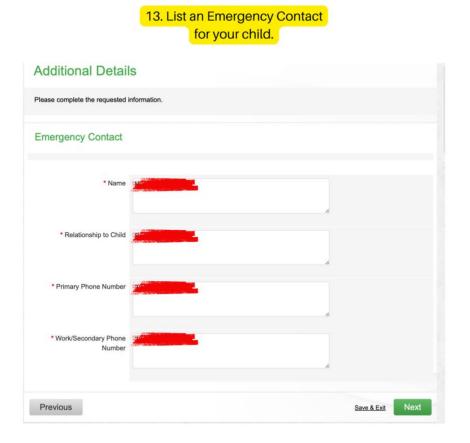
Opt In for Text Messages? Yes 
 Email Address

## 10. Enter your child's information. "Student's Name" should match the first and last name used to create the account in Step 5 and Step 6.



NC ACTION ATHLETES (06/24/			
Please complete the requested i	nformation.		
Model Release			12. Complete the rem additional detail
<ul> <li>By clicking Yes, I agree that ESCC has my permission to use any image of my child made with others at camp, or any written material that he/she may writte about camp for promotional purposes.</li> </ul>	(Yes 2)		
Previous		Save & Exit Next	

Please complete the requested information.	
Health Concerns	
Does this child have any     No	
allergies? If you selected yes, please list any allergies in the box provided.	
* Does this child have any physical, behavioral, learning. No t or other needs that we should be aware of at camo?	
If you selected yes, please list any needs in the box provided.	
* Is there anything else you would like for this child's camp leaders to be aware of prior to their annual at Camp Weavil?	
If you selected yes, please list any details in the box provided.	



#### 14. Make sure that only **one** program is listed in your cart and that your total is **\$175**.

Payment	
Below is an overview of the fees due.	
Your Fees	Detail View
Program	Amount (\$)
NC Action Athletes - NCMP-5041_25035 [2024]	\$175.00
Fees	\$175.00
Total	\$175.00
Previous	Save & Exit Next

15. Enter your card information and click Continue. After your payment has been processed, you will receive (1) a Payment Confirmation from the ESCC Business Office and (2) a Registration Confirmation from Camp Weevil.

Payment Method		Confirmation		
Transaction	Course Fee	Payment Method	Credit or debit card	
Amount	\$175.00			
Card Information				
Card number				
			Cancel Continue	