



JAMES BOWIE HIGH SCHOOL

❖ *Pride in Performance* ❖

February 2011

Dear Class of 2015:

Bowie High School invites you and all your 8th grade classmates who will attend Bowie to a summer orientation program called “**Camp Bowie.**” The orientation program is designed to familiarize you with the campus, our rules and expectations, and to answer your questions about high school. You will also have the opportunity to learn about the many activities and extra-curricular organizations that you will want to join!

You must choose from one of three sessions. Each session is for three days from 8:30 a.m. until 12:00 noon.

TRANSPORTATION WILL NOT BE PROVIDED AND YOU MUST FOLLOW DRESS CODE.

The dates for the sessions are as follows:

Session 1	June 7-9
Session 2	June 14-16
Session 3	June 21-23

Don't miss out! Return the enclosed registration form to Bowie High School, 4103 W. Slaughter Lane, Austin, TX 78749 **no later than April 1st!** Space is limited to **150 students** per session. We will make every effort to accommodate your first choice of dates on a first come, first served basis. Please indicate your 1st, 2nd, and 3rd choices of dates and we will send you written confirmation of the session you are to attend.

We look forward to meeting you at Camp Bowie! Come join the fun!

Sincerely,

Camp Bowie Staff

A Recognized School of Excellence

CAMP BOWIE



...CLASS OF 2015

Form must be filled in completely. Thank you!

Student's Information

Last Name _____ First Name _____ MI _____ Student # _____

Mother's Information

Student's Address Also? Yes No

Last Name _____ First Name _____ MI _____ Home Phone _____

Address _____ Zip code _____ Work Phone _____

Father's Information

Student's Address Also? Yes No

Last Name _____ First Name _____ MI _____ Home Phone _____

Address _____ Zip code _____ Work Phone _____

Emergency Contact

Person 1: Last Name _____ First Name _____ Phone _____

Person 2: Last Name _____ First Name _____ Phone _____

Health Services Information

Student's Doctor _____ Clinic _____ Doctor's Phone _____

Special Medical Conditions/Allergies of Which the School Should be Aware _____ Clinic's Phone _____

Special Medical Procedures of Which the School Should be Aware _____ Student Has Insurance?

Medications Taken Regularly: At School _____ At Home _____ Yes
No

NOTE: Selecting UNABLE for a session may cause your student to be unable to attend Camp Bowie if the other sessions are full.
All sessions reserved in the order received. Space is limited.

Please Select Your 1st, 2nd, and 3rd Preferences From These Sessions:

_____	Session 1	June 7 - 9	8:30-12:00
_____	Session 2	June 14 - 16	8:30-12:00
_____	Session 3	June 21 - 23	8:30-12:00

Mail the completed form to:
Bowie High School, 4103 W. Slaughter Lane, Austin, TX 78749
Attn: Rita Gonzales