The Syrian American Club
Arabic Language Summer Camps 2008

The Syrian American Club would like to announce that Arabic Language Camps will begin in the summer of 2008.

- Summer camps at S.A.C will be offered in two sessions:
  - Session 1: July 14 – 18
  - Session 2: August 4 – 8
  - Time: 10:30 A.M. – 1:30 P.M.

- Camps will be held at:
  Al-Sham Cultural and Community Center
  5729 Winsome
  Houston, Texas, 77057

- Our summer camps program will focus on the Arabic Language and provide an engaging, entertaining and educational experience for all kids ages 5-12, and assure parents that their child is having a great time in a safe and supervised environment.

- We strongly encourage everyone to take the opportunity and join us for a wonderful learning experience.

- **Registration:** We are accepting applications every Saturday 11:00 A.M. – 2:00 P.M. at:
  Al-Sham Community Center at:
  5729 Winsome Lane
  Houston, TX 77057

  or mail your check with the application to:
  SAC Summer Camps
  P.O. Box 571954
  Houston, TX 77257

  - Fees and Tuition (10% discount applies to SAC members):
    1st Child: $200
    2nd Child: $175
    3rd Child: $150

- For questions or to reserve a spot please contact:
  Mrs. Hazami Nabulsi at (713) 213-5397 or hnabulsi@sbcglobal.net
  or call Al-Sham Community Center every Saturday 11:00 A.M. – 2:00 P.M., at (713) 266-5577.

*Last day to accept application is July 7th, 2008*
Camper’s Name_____________________________ Birth Date___________ Sex □ M  □ F
Camper’s Name_____________________________ Birth Date___________ Sex □ M  □ F
Camper’s Name_____________________________ Birth Date___________ Sex □ M  □ F
Home Address______________________________ City__________________ Zip ____________
Email Address______________________________  Home Phone __________________________
Father’s Name______________________________  Mobile Number________________________
Mother’s Name______________________________ Mobile Number________________________
Session of interest
□ Session 1 July 14 – 18 10:30 A.M. – 1:30 P.M.
□ Session 2 August 4 – 8 10:30 A.M. – 1:30 P.M.
Special medical conditions to be noted ______________________________________________
_______________________________________________________________________________
In case of emergency, please list two contacts not living with you:
Name________________________ Relationship____________ Phone Number________________
Name________________________ Relationship____________ Phone Number________________
List any special comments for the teacher: ______________________________________________
________________________________________________________________________________
Payment Amount: $_________ □ Cash  □ Check# __________________________
□ Visa □ Master □ Card  □ AMEX □ Discover
Card # ________________________________ Exp. _____________________
Parent’s Signature ___________________________ Date__________________________

Please mail this form along with your payment to:
SAC Summer Camps
P.O. Box 571954
Houston, TX 77257