IMAGINE...

a full week dedicated to your love of writing with those who share your creative passion

IMAGINE...

inspiring activities with others who know how it feels to face the blank page

IMAGINE...

making your writing dreams come true

Imagine yourself as a

RED OAK writer!





Mount Mary University

2900 N Menomonee River Pkwy Milwaukee WI 53222

Retzer Nature Center

S14 W28167 Madison St Waukesha, WI 53188

Wilson Center for the Arts

19805 W Capitol Dr Brookfield WI 53045

CAMP TUITION

EARLY BIRD REG Until MAR 1: \$325

REGULAR REG MAR 1 – MAY 31: \$350

LATE REG
After JUNE 1: \$375

414-881-7276 kim@redoakwriting.com www.redoakwriting.com





Time Space Support Community

Led by accomplished writing coaches who tailor activities to the age and interests of each group, Creative Writing Camps provide young writers with the time, space, support and community they need to nurture their passion for writing.

Each day includes light-hearted activities, age-appropriate lessons on the craft of writing and, best of all, time to write. The grounds at our locations provide a lovely setting for gathering inspiration and listening to the writer within. We work outdoors as much as the weather will allow.

During the week, our writers share with others in a small writers' circle to receive input and support. Many list this as their favorite part of the week because they may not have writing friends at school or in their neighborhood. Friendships form quickly and last beyond our week at camp.





Camp Registration

For Parent/Guardian: This form is required for participation in all Red Oak programs. Please inform us of any changes. A new form must be completed at the beginning of each camp season.

Camp Location C	camp Start Date
Camper's Last Name F	First Name
Grade Camper will enter in FALL Birthdate (must	be older than 11)
Camper's Tshirt Size (Circle one) YL AS AM AL AXL	
Email Address*	Preferred Phone
*Unless otherwise indicated, we will use this as the primary contact	for communicating about the program.
Mailing Address/City/State/Zip	
Any allergies, medications or medical conditions we should be aware of?	
If so, please explain:	
Emergency Contact Info:	
Contact #1 Name	Phone
Contact #2 Name	Phone
Whom can we thank for recommending Red Oak to you?	
This information is correct and my child/ward has permission to engage in all program activities except as noted. In the event of an emergency, I hereby authorize the staff of Red Oak Writing, Ilc, to administer general first aid and to arrange transportation for my child/ward as necessary. As the parent/legal guardian of the participant, I intend to be legally bound for myself, my heirs, executors and administrators. I waive and release any and all rights and claims for damages I may have against the presenters, individually, their representatives, employers, employees, successors and assigns, for any and all injuries or claims of damages suffered by my child/ward during participation. Further, I hereby grant permission to publish my child's/ward's writing (digitally and in print) or short excerpts of writing for legitimate purposes and to use photographs/video taken during the workshop.	
Parent/Guardian Name (Print)	Please send registration and check to: Red Oak Writing, Ilc
Parent/Guardian Signature	PO Box 342 Genesee Depot, WI 53127
Date	Refunds (less \$25 processing fee) will be granted if cancellation is submitted at least 30 days prior to the beginning of the session