

# Midwest Brachial Plexus Network, Inc. 2012 Summer Camp Session

**June 1-3, 2012** at the Rotary Youth Camp  
22310 E. Colbern Rd. Lee's Summit, MO

***"THE SKY IS THE LIMIT"***

Our theme this year promotes the idea that we can accomplish anything we set our minds to. Our only limits are the ones we create for ourselves. Activities planned around this theme are building and launching rockets, pontoon boat tours of the lake, telescope viewing of the night sky and airplane rides. We also have planned many crafts, activities and games to support our "Sky is the Limit" theme.

**We are looking forward to seeing you there!**

Each year, the MBPN, Inc. holds a summer camp session sponsored by the Rotary Youth Organization. Families of children (all ages) with brachial plexus injuries are invited to spend the weekend having fun, enjoying nature and learning more about this injury. The camp is located on the shores of Lake Jacomo in Eastern Jackson County. The grounds feature a large swimming pool, an outdoor pavilion, nature trails, fire circles and an abundance of wildlife. The Rotary Camp donates its facility and supplies support staff and meals for the weekend. Crafts, outings, activities and snacks are donated by the MBPN, families, friends and area merchants. We are forever grateful for those who make camp possible each year.

***There is no charge for families to attend camp!***

**For more information**

**contact:**

**MBPN, Inc.**

**30505 E. 38th St.**

**Grain Valley, MO 64029**

**816-914-1957**

**[birthinjury@att.net](mailto:birthinjury@att.net)**



**Deadline to**  
**register**  
**APRIL 1, 2012**

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**Deadline to register is APRIL 1, 2012**

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**30505 E. 38th St.**

**Grain Valley, MO 64029**

**816-914-1957**

**Fax 816-224-1957**

**[birthinjury@att.net](mailto:birthinjury@att.net)**

**You can register by mail, email or fax.**

**MBPN, Inc 2012 Summer Camp Registration**

June 1-3, 2012

Rotary Youth Camp

22310 E. Colbern Rd. Lee's Summit, MO

**Family Members:** ( Include ages of children)

**T-Shirt size**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Contact Information:**

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Do any campers in your group require special accommodations or meals?

\_\_\_\_\_

*Please mail or fax this form to:*

MBPN, Inc.  
30505 E. 38<sup>th</sup> St.  
Grain Valley, MO 64029

Fax: 816-224-1957  
Phone: 816-914-1957

***In late April, you will receive a camp packet with information and all forms that need to be signed and returned before camp.***