



# Summer Camp Registration Form

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Parent Phone: \_\_\_\_\_ Camp Location: \_\_\_\_\_

Parent Email: \_\_\_\_\_

## Select Camp and Date:

<input type="checkbox"/> Outdoor Adventure	<input type="checkbox"/> Around the World	<input type="checkbox"/> Super Sports	<input type="checkbox"/> Cool S.T.E.A.M.
___ June 27 – June 30	___ July 4 – July 8	___ July 11 – July 15	___ July 18 – July 22
___ July 25 – July 29	___ Aug 2 – Aug 5	___ Aug 8 – Aug 12	___ Aug 15 – Aug 19

1<sup>st</sup> Parent/Guardian \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

2<sup>nd</sup> Parent/Guardian \_\_\_\_\_ Cell phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Child lives with: 1<sup>st</sup> Parent \_\_\_ 2<sup>nd</sup> Parent \_\_\_ Both \_\_\_ Guardian \_\_\_ Other \_\_\_

Name and phone number of person(s) other than the parents allowed to pick up your child:

1. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

3. Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

\* Any special instructions such as custody or other arrangements must be discussed with the camp director. All information will be kept confidential.

Please list any other information you would like to include about your camper: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_