

Summer Day Camp Registration

First Name:

Last Name:

Date of Birth and Age

Phone Number:

Physical Address

Mailing Address:

City:

Zip/Postal Code:

1. Camp 1 and Date

2. Camp 2 and Date

3. Camp 3 and Date

4. Camp 4 and Date

5. Camp 5 and Date

6. Camp 6 and Date

7. Camp 7 and Date

8. Camp 8 and Date

9. Camp 9 and Date

Note: For Summer Day Camps, all payments are due in full with registration.

Parent/Guardian

Home Phone/Work Phone

Emergency Contact/Number

Medical Information

Email Address

Parent Guardian Signature

Insurance Information