



Summer Camp Registration Form

Student Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Parent Name: _____

Employment Information & Contact #: _____

Emergency Contact #: _____

Alternative Contact #: _____

Camp Title: _____ Grade Level: _____

Form of Payment: Cash Check# _____

Credit Card Type _____ Credit Card # _____

Exp. Date _____ ID# _____ Zip code _____

Signature/Authorization _____ Date _____