

Spanish Camp 2017 Registration Form

Camper's Name: _____

(Last, first, middle)

Parents' Names: _____

Address: _____

(Street) (City, state, zip)

Home Phone: _____ Cell _____ Work _____

Emergency Contact Information:

(Name)

(Relationship to camper)

(Phone)

Parents' Email: _____

Camper's Date of Birth: _____

Camper's Grade in School: _____

(Which he/she will enter in the Fall)

Is there any information about your child that the camp staff should be aware of (i.e. handicapping conditions, diseases, allergies, activity restrictions)? Write on the back of the form if this space is not adequate.

Please list the names of people (other than parents) to whom you give permission to pick up your child from camp.