



### Summer Camp Registration Form

Camp Name			Camp Dates		
<b>Camper &amp; Parent's Information</b>					
Camper First Name			Last Name		
Entering Grade (Fall 2019)			Age	___ Male/ ___ Female	
Birthdate MM/DD/YYYY			School to attend this year		
Parent name			Parent name		
Daytime phone #			Daytime phone #		
Cell phone #			Cell phone #		
Address			Address		
City	State	Zip	City	State	Zip
Email address			Email address		
Do you give permission for anyone else (besides parents) to pick up child? ___ Yes ___ No					
Please give their name, address and phone #					
<b>Emergency contact information-If parents cannot be reached (Please list two people)</b>					
First: Name/relationship/phone number					
Second: Name/relationship/phone number					
<b>Additional Information</b>					
Select one ___ Day Camper ___ Overnight camper			Roommate first/last name		
Instrument/position played					
T-shirt Size (circle one) <b>S</b> <b>M</b> <b>L</b> <b>XL</b> <b>XXL</b>					
<i>To be guaranteed a t-shirt, this application must be received one month before camp begins.</i>					
Is there any medical information the Camp Director needs to know about your child? Describe.					
Dietary Restrictions ___ Yes ___ No If yes, please list _____					
Parent signature				Date	
<i>Thank you for registering . You will receive an email with your registration confirmation and follow up information. We look forward to meeting you. Please contact _____@uca.edu for further questions.</i>					