

Camps My Child Will Be Attending

Time Travel	May 31 – June 10	_____
Art	June 13 – June 24	_____
Weather	June 27 – July 1	_____
Rain Forest	July 5 – July 8	_____
Passports	July 11 – July 22	_____
Musical Theater	July 25 – July 29	_____

Family Information:

Childs Name: _____ Age: _____ Grade: _____

Birthdate: _____ Gender: _____ Phone Number: _____

Address: _____

City: _____ State: _____

Mother's Name: _____ Phone Number _____

Father's Name _____ Phone Number _____

Medical Information

Chronic Illness (asthma, seizures, diabetes, etc.) _____

Prescription Medicine: _____

Allergies and Diatary Restrictions: _____

Emergency and Pick Up Authorization

(Persons authorized to pick up and to be contacted in an emergency if I cannot be reached

1. Name _____ Relationship to Child _____
 Phone Number: _____ _Emergency ___ Yes _____ No/ Pick up ___ Yes _____ No
 Driver's License Number: _____
2. Name _____ Relationship to Child _____
 Phone Number: _____ _Emergency ___ Yes _____ No/ Pick up ___ Yes _____ No
 Driver's License Number: _____
3. Name _____ Relationship to Child _____
 Phone Number: _____ _Emergency ___ Yes _____ No/ Pick up ___ Yes _____ No
 Driver's License Number: _____
4. Name _____ Relationship to Child _____
 Phone Number: _____ _Emergency ___ Yes _____ No/ Pick up ___ Yes _____ No
 Driver's License Number: _____

Emergency Authorization:

I/We hereby authorize this facility to care for my child during the time he/she is in the facility, and authorize the Director, or her designee to obtain and consent to emergency medical treatment for my child while under their care, in the even that said Director, or designee is unable to contact me.

Parent's Signature: _____ Date: _____

Preferred Physician: _____ Phone: _____

Preferred Hospital: _____ Phone: _____

Picture Authorization:

I/We hereby authorize this facility to publish photographs of my child taken during summer camp activities in the local newspaper, as well as Facebook and all other social media sites.

Parent's Signature: _____ Date: _____

Needed Records for your child to attend camps:

1. Copy of Social Security Card
2. Copy of birth certificate
3. Current immunization certificate