

Child _____
Age _____
Week of Camp _____

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name: _____

Email Address: _____

Relationship to Child: _____

Home Address: _____

Home Phone Number: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone #: _____ Hours at Work: _____

Cell Phone Number: _____

PARENT/GUARDIAN INFORMATION:

Parent/Guardian Name: _____

Email Address: _____

Relationship to Child: _____

Home Address: _____

Home Phone Number: _____

Employer's Name: _____

Employer's Address: _____

Employer's Phone #: _____ Hours at Work: _____

Cell Phone Number: _____

Parent/Guardian Signature

Date

*****Please note that all information is kept confidential*****