



# REGISTRATION - Please Print Clearly

Password \_\_\_\_\_

Name of Child \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_

Sex:  M  F Home Phone \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

The following are authorized persons for child release and emergency contact. List order of emergency contact calls by numerals in the boxes (1,2,3, etc.) before each contact person. Court documents of legal guardianship must be provided if applicable and if parent is disallowed contact with child.

Mother \_\_\_\_\_  
 Legal guardian  Yes  No Email \_\_\_\_\_

Phone #1  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Phone #2  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Father \_\_\_\_\_  
 Legal guardian  Yes  No Email \_\_\_\_\_

Phone #1  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Phone #2  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_  
 Legal guardian  Yes  No Email \_\_\_\_\_

Phone #1  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Phone #2  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Name \_\_\_\_\_  
 Legal guardian  Yes  No Email \_\_\_\_\_

Phone #1  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

Phone #2  Cell  Work  Home (\_\_\_\_) \_\_\_\_\_

\*\* Camp Fee to be paid on Monday each week - Health forms required for Pre-school only \*\*

IN THE EVENT OF AN EMERGENCY such as an accident or sickness, I request that the camp contact me or the emergency contact listed above. If neither person can be reached, I authorize the camp to take whatever action deemed necessary.

PARENTAL STATEMENT I hereby give permission for my child to participate in all camp activities, including sports and camp-sponsored field trips, and hereby release Florida Bible Church, and its staff, from any liability caused by injury to my child during camp-sponsored activities. I certify that I have read camp policies and procedures and agree to abide by them.

Please list any known Allergies: \_\_\_\_\_

Please list any additional Special Instructions: \_\_\_\_\_

Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Name of Doctor \_\_\_\_\_ Phone \_\_\_\_\_

In order for us to guarantee space, we need to know the weeks you're planning to attend camp.

*Office Use Only*

- Week 1/June 1 \_\_\_\_\_
- Week 2/June 7 \_\_\_\_\_
- Week 3/June 14 \_\_\_\_\_
- Week 4/June 21 \_\_\_\_\_
- Week 5/June 28 \_\_\_\_\_
- Week 6/July 5 \_\_\_\_\_
- Week 7/July 12 \_\_\_\_\_
- Week 8/July 19 \_\_\_\_\_
- Week 9/July 26 \_\_\_\_\_