



**Summer Camp Registration Form  
July 8-12, 2024**

**Student Information**

Student's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: M F

School: \_\_\_\_\_ Grade: \_\_\_\_\_

Home Address: \_\_\_\_\_

**Parent/Guardian Information**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

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Email: \_\_\_\_\_

**Emergency Contact Information**

In the event that a parent/guardian cannot be contacted, please contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone #: \_\_\_\_\_



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