

## 2019 SUMMER CAMP REGISTRATION FORM 9am-4pm Campers 5 yrs &up



Name:			Sex:	Age:		D.O.B.	
Mom's Name:			Dad's Name:				
Address:			City:			State:	
Home Phone:	Mom's Cell:	Mom's Cell: Mom'			Work #:		
Dad's Cell:		Dad's Work:			E-mail:		
Password: (word/phrase that can be used to confirm safe pick-up			Alternative Contact Person:			Emergency Ph#:	
Are there any medical co	nditions/alle	rgies to whi	ch we should	be alerted?	0	Yes ONC	)
Is your child currently enr	olled in class	ses/team at	Footnotes Da	ance and Mu	sic? 0	Yes ONo	
I understand that it is the intent of Fo its employ						e if I am not available I au tment, which may be rec	
Signature	e of Parent/Legal (	Guardian				Date	?
	Person's	Authorize	d to Pick Up	(other than p	arents and emo	ergency contact)	
Name: Ph#:			Name:				Ph#:
Name: Ph#:			Ph#: Name:				Ph#:
		Sele	cted Weeks	5 (indicate wee	eks attending)		
Wk 1: June 3-7	Wk 2: June 10-14		Wk 3: June 17-21		Wk	4: June 24-28	<u>Wk 5:</u>
0 5 Days 0 3 Days 0 2 Days	0 5 Days 0 3 Days 0 2 Days		0 5 Days 0 3 Days 0 2 Days		0	5 Days 3 Days 2 Days	CLOSED JULY 1-5
Wk 6: July 8-12	k 6: July 8-12 Wk 7: July 15-19		Wk 8: July 22-26		<u>Wk </u>	9: July 29-Aug 2	
0 5 Days	0 5 Days 0 5 Days		0 5 Days		0	5 Days	
0 3 Days	0 3 Days		0 3 Days		0 3 Days		
0 2 Days 0 2		Days 0 2 I		Days	0	2 Days	
Weekly F	Rate: \$95		3 Days: \$80	2 0	ays: \$65	Daily Ra	ate: \$40