

Summer Camp Registrant Information Sheet

Parent(s)

Name: _____ **Relationship**
 _____ **Home phone:** _____ **Cell phone:** _____
 _____ **Family e-mail:** _____
Address: _____ **City:** _____ **Postal Code** _____

Name: _____ **Relationship**
 _____ **Home phone:** _____ **Cell phone:** _____
 _____ **Address:** _____ **City:** _____ **Postal Code** _____

Name of child(ren)	Gender	Age	Workshop(s) Attending	Week or Days attending	Medical/ Custody concerns	Health card #

Emergency Contacts

1. **Name:** _____ **Relationship**
 _____ **Home phone:** _____ **Cell phone:** _____

2. **Name:** _____ **Relationship**
 _____ **Home phone:** _____ **Cell phone:** _____

Names of person/persons who have permission to pick up your child/ren

Other relevant information