

**Summer Camp Registration Form**  
**Session 1: June 5-9, 2017**  
**Session 2: June 12-16, 2017**  
**9am – noon M-F**

Child's Name \_\_\_\_\_  
Last First

Age (as of June 1) \_\_\_\_\_ Date of Birth \_\_\_\_\_  
**Camper must be 22 months by June 1<sup>st</sup> through age 5**

Session 1: \_\_\_\_\_ Session 2: \_\_\_\_\_ Both Sessions: \_\_\_\_\_

Name/Address of parent or guardian \_\_\_\_\_

Street City Zip

Phone: \_\_\_\_\_ Work or mobile phone #: \_\_\_\_\_

Pediatrician \_\_\_\_\_ Phone # \_\_\_\_\_  
Does your child have any allergies? \_\_\_\_\_

Please list two people to be called in an emergency if the parent cannot be reached:

Name \_\_\_\_\_ phone \_\_\_\_\_  
Name \_\_\_\_\_ phone \_\_\_\_\_

The person(s) listed below is NOT authorized to pick up my child(ren).  
\_\_\_\_\_

In the event that I can not be reached immediately, I give Reveille permission to transport my child to a hospital if necessary and obtain medical treatment for my child named above.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

**Tuition: \$175.00** per session

**Registration Fee:** A nonrefundable registration fee of **\$50.00** per session must accompany the application. This will be credited towards the tuition. The balance is due by June 1<sup>st</sup>.

*All children must have proof of a current immunization record **and** have had a physical exam within a year of the first day of camp. The state is also requiring that we see your child's **original birth certificate** before he/she attends camp if we do not already have one on file.*