

Camp Humane Registration

Summer 2015

(PLEASE PRINT ALL INFORMATION CLEARLY)

(ONE REGISTRATION FORM PER CHILD.)

Student Information:

Name:			
Address:			
City:	State:	Zip:	
Date of Birth: ///	Phone (if applic	able): <u>()</u>	<u> </u>
Allergies:			
Medical/Other Critical Inform			
If your child has any sibling(s			
Mother/Guardian Contact:			
Name:			
Home Phone: ()	Ce	ll Phone: ()	
Work Phone: () -	DL	#:	

Father/Guardian Contact

Name:					
Home Phone: (Cell Phone: (
Work Phone: (DL#:				
With whom does your child live?					
Emergency Contact					
Name:	Relationship:				
Phone: () -	Alt. Phone: ()				

Camper Pick Up List

Additional persons (aside from the child's parents/guardians and emergency contact) who your child may be released to at any time of the day, without additional permission

Name:	Phone: ()
Name:	Phone: (<u>)</u>
Name:	Phone: ()

Session Information

Please note that there are 20 spaces per camp, and Camp Humane campers are selected on a first come first serve basis. Registrations will not be processed until payment is received. We cannot hold spaces without full payment. If the camp your child has signed up for is full, you will be notified immediately so you may select a different camp or request a full refund.

I am registering my child for the following session(s)

June 16 th -18 th from 9:00am-3:00pm						
July 21 st -23 rd from 9:00am-3:00pm						
August 4 th -6 th from 9:00am-3:00pm						
TOTAL:(\$150/s	ession)					
Shirt Size (Circle):	Youth	n / Adult				
Circle: Small	Medi	um	Large	X-Large		
Where did you hear about Camp Humane (Circle)?						
Aggielandhumane.org	Radio	Flyer	Other			
Pictures						
In order to publish a photo o "Yes" or "No" and initial. Yo			J			
YES, YOU MAY / NO YOU I	MAY NOT	use my child'	s image on the web	bage/AgHS media.		
Initial (If not initia	led, your c	hild's image	will not be used.)			
<u>Understanding</u>						
I,	, the p	parent or guar	dian of	, have		

I, ______, the parent or guardian of ______, have enclosed all medical and other pertinent information regarding the care of my child. As the parent or legal guardian of the student, do hereby release any claims, cause of action, or damages I may have against the Aggieland Humane Society for injury to the student while he or she is participating in Camp Humane. I certify the information I have provided is correct and complete.

Parent/Guardian Signature:	Date:	/ /
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