

**Camp St. Peters on the Hill
Summer Day Camp
2014**

Camper's Last Name (print) _____ First _____ M.I. _____ Likes to be called _____

Boy / Girl (circle) _____ Date of Birth _____ Grade entering _____

T-Shirt size (circle) S M L XL

Parent _____

Parent _____

Home Address _____

Home address _____

City _____

City _____

E-Mail Address for billing _____

Email Address for billing _____

Place of employment _____

Place of employment _____

Names of others authorized to pick up child _____

LIST TWO PEOPLE TO CONTACT IN CASE OF AN EMERGENCY WWHEN A PARENT/GUARDIAN CANNOT BE REACHED

Name _____

Name _____

Address _____

Address _____

Phone _____

Phone _____

Photography Permission

Camp St. Peters reserves the right to use photographs taken during summer camp programs in our brochures , advertisements, and promotional materials.

PARENT/GUARDIAN SIGNATURE

DATE

Parents, please complete the registration packet. All paperwork is due when you resister for camp.

**Thank you,
Mrs. Allen**