

BRCVPA SUMMER CAMP REGISTRATION FORM 2024

If you would like to reserve a spot for your child or children in our 2024 Summer Enrichment Camp, please complete this form for **each child** attending.

There is a non-refundable **\$25 registration fee per camper** to hold their spot until payment due dates. **100** camp spots will be filled on a first come first served basis.

PLEASE PRINT:

Child's Name: _____ Grade (2024-2025): _____

Home Address: _____ City: _____ Zip: _____

Parent #1's Name: _____ Cell: _____

Parent #1's Work #: _____ Email: _____

Parent #2's Name: _____ Cell: _____

Parent #2's Work #: _____ Email: _____

Child's Current School: _____

My child may be released to the person(s) signing this agreement or to the following:
(A picture ID will be required for anyone other than yourself picking up your child.)

Name: _____ Relationship to Parent: _____

Phone number: _____

Name: _____ Relationship to Parent: _____

Phone number: _____

Emergency contacts (other than parents/guardian)

#1 Name: _____ Phone Number: _____

#2 Name: _____ Phone Number: _____

Please list any persons **NOT** allowed to pick up your child:

My child is currently on medication(s): _____

My child has the following special needs: _____

My child's shirt size is (circle one): YS YM YL AS AM AL

My child will participate in (circle one): Session 1 Session 2 Both sessions

Amount enclosed: _____ Payment form: Cash Check # _____

Money Order

Online Confirmation #: _____