

Emergency Contact & Child Information Form

(To ensure your child's safety and well-being, please complete this form fully before the start of Camp activities.)

Child's Information

Full Name (Last & First): _____ Shirt Size (Youth Sizes): _____

Gender: _____ Grade: _____ Age: _____

Allergies (if none, write 'N/A'): _____

Parent/Guardian Information

Parent/Guardian Name 1 (First & Last): _____

Primary Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

Parent/Guardian Name 2 (First & Last): _____

Primary Phone Number: _____ Alternate Phone Number: _____

Email Address: _____

Authorized Pick-Up List

(Individuals authorized to pick up your child. All must be at least 18 years old and present a valid I.D.)

1. Full Name: _____

Phone Number: _____

2. Full Name: _____

Phone Number: _____

Acknowledgment & Signature

I acknowledge that the information provided is accurate and up to date.

Parent/Guardian Signature: _____

Date: _____

