



Sea Turtle Camp

June 2010

Camp Registration Form

GENERAL INFORMATION :

Child's Name _____ **Male/Female**

Birthday ____/____/____ **Age during camp** ____ **Shirt size:** Youth S M L XL
Adult S M L XL

Week of: June 7th – 11th June 14th – 18th June 21st – June 25th June 28th – July 2nd
10-12 years 6-9 years 10-12 years 6-9 years

Special needs: (including allergies, current medications, sensitivities, etc.)

Parent/Guardian Name: _____ **Relationship to child:** _____

Address: _____

City _____ **State** _____ **Zip Code** _____

Local Address: _____

Phone: _____ **Cell:** _____ **Alt. :** _____

Email: _____

Emergency contact: _____ **Relationship to child:** _____

Phone: _____ **Cell:** _____ **Alt. :** _____

How did you hear about us? _____

