

2019 SUMMER CAMP REGISTRATION FORM:

Registrations are processed in the order received. Parent packet forms are required to attend and includes a HEALTH FORM and PARENT CONFIDENTIAL INFORMATION FORM. Simply fill in the Camper Information Section and Payment Information. For those who wish to email these forms back, please send to thegrindadmin@thegrindfs.com.

CAMPER INFORMATION: (Please print legibly – required by all)

Name: (last) _____ (first) _____ (middle) _____

Sex: (check one) ☐ male ☐ female Date of Birth: (ages 5-12 only) ____/____/____

Mailing Address: _____ City: _____

State: _____ Zip: _____ School attending this year: _____

PARENT INFORMATION:

1st Parent/Guardian Name: _____ Relationship: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

2nd Parent/Guardian Name: _____ Relationship: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

PICK UP AUTHORIZATION:

For safety and security reasons, we must know if someone other than the names person(s) in the “Parent Information” section will be picking up your child from camp. If so, please indicate below. If no one is listed, on the person(s) in the “Parent Information” section will be allowed to pick up the camper associated with this registration. In all cases, proper photo ID will be required in order to pick up the camper. There are no exceptions.

#1 Name as it appears on license

#2 Name as it appears on license

Relationship to camper: _____ Relationship to camper: _____

ALLERGIES (check one) ☐ YES ☐ NO IF YES, WHAT IS THE ALLERGY AND REACTION SEEN?

