

Registration form for
Community Schools Winter Camp

February Camp will be held at: Britt David Elementary

Dates: February 11, 12, and 15



(Please Print Clearly)

1. Child (ren) Name: 1) _____ 2) _____
3) _____ 4) _____

2. Parent's/Guardian's Name: _____

3. Contact Information:

Home: () _____ Work: () _____ Cell: () _____

4. Authorized Person(s) to pick up child: _____

5. Emergency Contact: Name: _____ Phone #: _____

6. My child (ren) attends _____ After School Program.
(Name of School)

** If your child is not a regular participant of our program put N/A on line 6 and a registration fee of the following will be incurred:

\$15.00 one child, \$25.00 two children, three or more \$35.00

In order for you to sign up for Camp, you must not be delinquent in late fees or your weekly payments.

Parent/Guardian Signature _____ Date _____

Site Supervisor's Signature _____ Date _____

Site Supervisor's Use Only

Of Children _____ Amount Due \$ _____ Amount Paid \$ _____

Form of payment: check/money order (circle one) Check #: _____

Site Supervisor in charge: _____