## **CAMPER INFORMATION**

## Highlighted areas MUST be completed.

CAMPER NAME	
Campo	ers cannot be admitted to camp without a completed:
	This Camper Information form,
	Registration form (fill in the form with CAMPER information),
	Health History form, and
	Waiver and Release form.
	ACT INFORMATION: State regulations require we have parental contact information <u>and</u> at least one onal emergency contact person.
PARE	NT OR LEGAL GUARDIAN
<mark>Name</mark>	
Relation	onship to Camper
<mark>-lome</mark>	Cell
Email	
SECO	ND PARENT/GUARDIAN OR EMERGENCY CONTACT
<mark>Vame</mark>	
Relatio	onship to Camper
	WorkCell
Email	
ADDI	TIONAL CONTACT IN THE EVENT PARENT/GUARDIAN CANNOT BE REACHED
Name	
Relatio	onship to Camper
Home	Work Cell