

\_\_\_AM  
\_\_\_PM  
\_\_\_ALL DAY

## Westchase Summer Camp 2022 Registration Form

(All information below must be completed)

Camper's Name: \_\_\_\_\_ Sex: M / F Age: \_\_\_\_\_  
(one form per individual camp participant)

Date of Birth: \_\_\_\_\_ Westchase Resident Yes / No

Address: \_\_\_\_\_

City : \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_\_

Cell Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Parent or Legal Guardian: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

The following people ARE allowed to pick up the camper: \_\_\_\_\_

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The following people are NOT allowed to pick up the camper: \_\_\_\_\_

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List any allergies or medical conditions that the camper has: \_\_\_\_\_

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Please check the weeks they will be attending:

<input type="checkbox"/> Week 1: May 30-June 3	<input type="checkbox"/> Week 4: June 20-25	<input type="checkbox"/> Week 7: July 11-15
<input type="checkbox"/> Week 2: June 6-10	<input type="checkbox"/> Week 5: June 27-July 1	<input type="checkbox"/> Week 8: July 18-22
<input type="checkbox"/> Week 3: June 13-17	<input type="checkbox"/> Week 6: July 4-8	<input type="checkbox"/> Week 9: July 25-29
		<input type="checkbox"/> Week 10: Aug 1-5

Childs shirt size: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ ( youth sizes )

**\*\*\*Important Note – Staff is not authorized to dispense any form of medication to participants, either prescribed or over the counter. If your child is required to take medication, please make appropriate arrangements. \*\***

Signature of Parent or Guardian \_\_\_\_\_ Date: \_\_\_\_\_