



Registration Form

(one per child)

July 28th – August 1st, 2025

8:15 am to 11:45 am

Child's Name: _____ **Gender:** _____

Date of Birth: _____ **Age:** _____ **School Grade Completed** _____

(accepting children who have completed Pre-K and up)

Name of Parent/Caregiver (s): _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Parent/Caregiver's Cell: _____ **Home phone:** _____

Email Address: _____

Home Church: _____ **Fee:** \$25 per child
(\$35 after June 30th, 2025)

**Allergies, Medical conditions,
or Special Needs:** _____

In case of emergency, contact: _____

Phone: _____

Relationship to child: _____

