

Summer Day Camp Registration Form

Camper Name _____
Last First Middle

Address _____

Telephone () _____

E-mail address _____

Date of Birth _____ Age _____ Gender _____ Grade Entering _____ (must be 1st-5th)

Name of Home Congregation _____



Profile Information

The following information is helpful to our camp staff in getting to know campers better and more quickly:

Preferred Name: _____ Pet(s)Name(s): _____

Brothers/ Sisters (names and ages): _____

Special Interests or Hobbies: _____

My child most easily relates to [] males [] females. My child is: [] out-going [] quiet and shy in groups.

Concerns, allergies, or anything that the Day Camp staff should be aware of: _____

To be answered by camper: "The #1 thing I hope we do at Day Camp is... _____."

Permission (This section must be signed in order for your child to attend camp)

_____ HAS MY PERMISSION TO ATTEND DAY CAMP.

Parent/Guardian's Signature

please print Parent/Guardian name here

Check this box if you **DO NOT** give permission for Agapé ☩ Kure Beach Ministries to use pictures of your child for promotional purposes (camp brochure, web site, staff recruiting display, etc.)

Date

Mail to:
First Reformed UCC
513 W. Front Street
Burlington, NC 27215