

CARDEN SCHOOL OF SACRAMENTO
Camp Registration - YOUTH (1st - 8th grades)

Name: _____ Boy _____ Girl _____

Grade (Fall 2009): _____ Returning Camper (Yes/No) Camper's School: _____

Parent 1:

Name: _____
 Address: _____
 City/Zip: _____
 Home Phone: _____
 Work Phone: _____
 Cell Phone: _____
 E-Mail: _____

Parent 2:

Name: _____
 Address: _____
 City/Zip: _____
 Home Phone: _____
 Work: _____
 Cell Phone: _____
 E-Mail: _____

Please Check the Following Camps for Which You Are Registering:
Please enclose the following fee and return by June 1, 2009

ADULT OR YOUTH

One-time Registration Fee of \$25.00

Circle Child's T-shirt Size: L - M - S - YXS

YOUTH CAMPS

	WEEK	DATES	Pool	Field Trip	Treat Card			TOTAL
	1	June 8 - June 12						
	2	June 15 - June 19						
	3	June 22 - June 26						
	4	June 29 - July 3						
	5	July 6 - July 10						
	6	July 13 - July 17						
	7	July 20 - July 24						
	8	July 27 - July 31						
	9	August 3 - August 7						
	10	August 10 - August 14						
	11	August 17 - August 21						

Unless a letter is written to the contrary, Carden School of Sacramento presumes that photos taken of the campers may be used in the summer program brochure and other promotional materials.

NO REFUNDS for any reason will be given AFTER the Summer Camp week begins.

I have read Carden School of Sacramento's Camp Carden brochure and agree to all policies including my child's attendance on swimming trips to the public pool.

Emergency Contact: _____ Phone Number: _____

All persons authorized to pick up camper from campus:

Name: _____ Relationship: _____ Phone: _____
 Name: _____ Relationship: _____ Phone: _____
 Name: _____ Relationship: _____ Phone: _____

Please list any medical considerations that Carden School of Sacramento should be aware of:

Physician's Name: _____ Phone: _____
 Insurance: _____

I hereby authorize my child to attend the scheduled field trips provided by Carden School of Sacramento's Camp Carden. I authorize my child to participate in the method of transportation that the school is providing, including private vehicles, bus, or on foot. I certify that no information concerning the health of this camper has been withheld or misrepresented.

Signature of Parent: _____ Date: _____

