



## Elings Park Summer Camp Registration

Camp: \_\_\_\_\_

**Basketball**    **Baseball**    **Softball**    **MVP Baseball**    **Soccer**    **BMX**  
**Mountain Bike**    **Nature & Games**    **Sports Activities**    **Theatre**    **Science Activities**

Date of camp: \_\_\_\_\_

Camper Last Name: \_\_\_\_\_ Camper First Name: \_\_\_\_\_

Gender:    M    F    (circle one)

Date of Birth: Month: \_\_\_\_\_ Day: \_\_\_\_\_ Year: \_\_\_\_\_

School Grade in Fall:    (circle one)

          K    1    2    3    4    5    6    7    8

School Name: \_\_\_\_\_

Parent/Guardian Last Name: \_\_\_\_\_

Parent/Guardian First Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_

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

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

E-Mail Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

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

Allergies: \_\_\_\_\_

How did you hear about the Camp? \_\_\_\_\_

Payment:    \_\_\_\_\_ Visa    \_\_\_\_\_ Master Card    Card # \_\_\_\_\_

Exp. Date \_\_\_\_/\_\_\_\_ Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

Zip Code \_\_\_\_\_