

Friends of the Environment Summer Camp 2017

SEA BEANS (Ages 3-5)

July 17th-21st 9am – 12 noon daily

Please return completed form before 19th June 2017. Registration is first come, first served. Camp cost is \$50 a week

Name of child:	
Date of Birth:	Age:
Mother's name: Mothers Contact Work #: Cell #: Email:	Father's name: Father's contact Work #: Cell #: Email:
Emergency Contact:	
Does your child have any allergies? If yes, please explain:	Is your child currently taking medication? If yes, please explain:
Does your child have any medical conditions that we should be aware of? If yes, please specify.	

Name of your family doctor:		
Does your child have up to date medical insurance?		
Insurance company:		
Policy number:		
Policy holder's name:		
Has your child attended FRIENDS Summer Camp before?:		
Can your child swim? YES/ NO		
Beginner	Intermediate	Advanced
I _____, have agreed to allow my child, _____ to attend FRIENDS Environmental camp and to participate in all camp activities including water activities and offsite field trips. I agree that I will not hold any Friends of the Environment staff or any camp staff liable for any accident or injury that may occur during this time.		
Signature of parent/guardian _____/Date _____		
FRIENDS USE ONLY		
Paid	Payment Type	DOR: