

# PAS KIDS CAMP REGISTRATION FORM

JULY 10-14, 2023

AM SESSION 9:00 AM-11:30 AM \_\_\_\_\_

PM SESSION 12:30 PM-3:00 PM \_\_\_\_\_

EVENING SESSION 5:00 PM-8:00 PM \_\_\_\_\_ (July 10-13)

CHILD'S FIRST NAME \_\_\_\_\_ NICKNAME \_\_\_\_\_

CHILD'S LAST NAME \_\_\_\_\_

BIRTHDATE \_\_\_\_\_ AGE \_\_\_\_\_ SEX \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PARENTS NAMES(M) \_\_\_\_\_ (F) \_\_\_\_\_

PHONE(M) \_\_\_\_\_ (F) \_\_\_\_\_ EMAIL \_\_\_\_\_

SPECIAL NEEDS/ALLERGIES \_\_\_\_ YES \_\_\_\_ NONE

IF YES EXPLAIN CONDITION \_\_\_\_\_

NAME OF PERSON PICKING UP CHILD \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF PERSON PICKING UP CHILD \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

COST: \$60 \_\_\_\_\_ Second Child(same family) COST: \$50 \_\_\_\_\_

Please make payments to the Gallery at 119 State St., Pendleton, IN or by phone at (765) 778-0986

**WE WOULD LIKE PERMISSION TO USE YOUR CHILD'S PHOTOS IN ANY PUBLICITY WITH OUR SUMMER CAMP**

I grant permission(name)\_\_\_\_\_RELATIONSHIP\_\_\_\_\_