



Please print one form per child

Registration Deadline: TBA

Name \_\_\_\_\_  
First Middle Last

Preferred Name \_\_\_\_\_ Birth Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Home Phone (\_\_\_\_) \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

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

Physician \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Insurance Carrier \_\_\_\_\_ Group/Policy Number \_\_\_\_\_

Grade completed in school \_\_\_\_\_

Home Church \_\_\_\_\_ City \_\_\_\_\_

Special interests or hobbies \_\_\_\_\_

Any restrictions to physical activities \_\_\_\_\_

Any allergies (food, drugs, insects, etc.) \_\_\_\_\_

List any people and their phone numbers who may pick up your child from Summer Musical Camp

**Emergency Release**

I will not hold Emanuel's Lutheran Church, its staff, or the congregational volunteers responsible for accidents, claims and damages arising from my child's participation in camp activities. I also give Emanuel's Lutheran Church permission to use any photograph/video of my child or me, taken at camp, in future promotional materials for its sites and programs.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Yes, I will attend: (Check all that apply.) \_\_\_\_\_ Summer Musical \_\_\_\_\_ Handbell Camp