

# Summer Day Camp Registration Form

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

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(919)552-9421



Telephone ( ) \_\_\_\_\_

E-mail address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering \_\_\_\_\_ (must be 1<sup>st</sup>-5<sup>th</sup>)

Name of Home Congregation \_\_\_\_\_

## Profile Information

The following information is helpful to our camp staff in getting to know campers better and more quickly:

Preferred Nickname: \_\_\_\_\_ Pet(s)Name(s): \_\_\_\_\_

Brothers/ Sisters (names and ages): \_\_\_\_\_

Special Interests or Hobbies: \_\_\_\_\_

My child most easily relates to [ ] males [ ] females. My child is: [ ] out-going [ ] quiet and shy in groups.

Concerns, allergies, or anything that the Day Camp staff should be aware of: \_\_\_\_\_  
\_\_\_\_\_

To be answered by camper: "The #1 thing I hope we do at Day Camp is... \_\_\_\_\_."

## Permission (This section must be signed in order for your child to attend camp)

\_\_\_\_\_ HAS MY PERMISSION TO ATTEND DAY CAMP.

Parent/Guardian's Signature

please print Parent/Guardian name here

- Check this box if you **DO NOT** give permission for Agapé ☩ Kure Beach Ministries to use pictures of your child for promotional purposes (camp brochure, web site, staff recruiting display, etc.)

\_\_\_\_\_ Date

Return completed form to your church's Day Camp Coordinator