Doll it Up Summer Camp Registration

Return form and payment to hold your spot before the camp fills up!

Child’s Name ____________________________________________________________

Grade (2019-2020) ___________ Age _______________ Doll’s Name ________________

School child will attend in 2019-2020 _______________________________________

Parent/Guardian Name ______________________________________________________

Main Phone Number _______________________________________________________

Email Address _____________________________________________________________

Authorized Pick Ups and Emergency Contact (other than parent guardian)

Name __________________________ Relationship _______________ Phone #___________

Name __________________________ Relationship _______________ Phone #___________

Please list any information that will require the attention of the instructors? A School Nurse will not be on campus. List special needs, allergies, diet, medication, etc. ________________________________

________________________________________________________________________

Does your child have permission to...

Play on school equipment? _____Yes _____No

Have their picture taken and published? _____Yes _____No

I agree that the above information is correct and will let Doll it Up Summer Camp instructors know if any changes occur.

Parent Signature ___________________________ Date ________________

Once forms have been received, we will send out an email and link for you to register and pay the $5 registration fee on-line through Shelby County Community Education.