



Registration Form

St. George's Kid's Camp

60 Guelph Street, Georgetown, ON
905-877-8044

Fun for children ages 4 – 9

July 7-11, 2014

Cost: \$35.00 per child

Child's name: _____ Gender: M F

Parent/Guardian name: _____

Address: _____ Postal Code _____

Home Phone: (____) _____ Cell Phone: (____) _____

Home email address: _____

Child's Age: _____ Birth Date: _____ Height _____ Weight _____

T- Shirt Size: Small Medium Large

Siblings in program: _____ Friends in program _____

In case of emergency (when parent/guardian cannot be reached) please contact::

Name: _____ Telephone: _____

Relationship to child: _____

Known allergies or medical concerns: _____

Medications _____

Health card number: _____

Person responsible for picking up this child at the end of each VBS day:

Name: _____ Telephone: _____

Signature of parent/guardian: _____

