

Music Camp 2006 Registration Form

July 9-15, 2007

Name: _____ Nickname: _____

M _____ F _____ Birthdate: _____ Age: _____

Address: _____

City/State/Zip: _____

Telephone: _____ Email address: _____

School Attending in Fall: _____ Last Grade Completed: _____

Church Attending: _____

Mother's Name: _____

Address: _____

Phone: _____ Cell Phone: _____

Father's Name: _____

Address: _____

Phone: _____ Cell Phone: _____

In case of emergency, please contact:

Name: _____ Phone: _____

Allergies/Medical Information/etc. _____

Name of a special friend your child might like to be with: _____

T-Shirt Size: _____ Team Name (for church use only): _____

For office use only:

Amount Paid: _____ *Date Paid:* _____