

# ARTS CAMP 2017 REGISTRATION FORM

Camper Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Birthdate \_\_\_\_\_

Hometown/Home congregation: \_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

Parent Email Address: \_\_\_\_\_

## Camp T Shirt Size (please check one)

<input type="radio"/> Adult XSmall	<input type="radio"/> Adult Medium	<input type="radio"/> Adult XLarge
<input type="radio"/> Adult Small	<input type="radio"/> Adult Large	<input type="radio"/> Adult 2XLarge

## Parent/Guardian Permission

*\*I give permission for my child named on this form to receive medical care in the event of an emergency during the Immanuel Lutheran Arts Camp in Mankato, MN on March 31-April 2, 2017.*

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Emergency Phone Number(s): \_\_\_\_\_

Please note food allergies and medical conditions that the Arts Camp staff should be aware of and/or assist with. Please list **ALL** medications (including OTC) that your camper is bringing to camp with them. We are happy to store medications if applicable. (Please attach another sheet if necessary).

## Registration Checklist:

- Include:
  - This completed form
  - Completed Session Preferences Form
  - Camp fee of \$40 (checks written to Immanuel Lutheran School)
- Registration Deadline: March 20th (postmarked)
- Mailed to Immanuel Lutheran School, Attn: Arts Camp, 421 N. Second St., Mankato, MN 56001