

San Marcos Lutheran Church Day Camp 2016
“Make a Joyful Noise!”
July 11-15, 9am-3 pm

Registration Form

Child's Name _____

Birthdate _____ Grade in the fall _____

Parent(s) name(s) _____

Address _____

Parent Cell phone _____ Parent Cell phone _____

Home phone _____

Parent(s) work phone(s) _____

E-mail _____

In case of emergency, contact _____

Allergies or other medical conditions _____

T Shirt size (circle one) **XS** **S** **M** **L** **XL**

Name of home church, if any _____

I hereby GRANT / DO NOT GRANT (please choose one) permission for San Marcos Lutheran Church to use pictures of my child (name of child) _____ on their website for informational or promotional purposes.

Parent/Legal Guardian (print name) _____

Parent/Legal Guardian (signature) _____

(If you need a full or partial scholarship for your child, contact Pastor Karla.)