

SLM Summer 2019 Day Play Registration

Tuesday, July 16 (deadline: June 16)



Camper Information:

(Please Print)

Camper's Last Name: _____ Camper's First Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Gender: _____ Age: _____ Birthdate: _____ School Grade entering in Fall 2018: _____

Parent or Guardian Name(s): _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-mail: _____

Emergency Contact (other than guardian listed above): _____

Emergency Contact Relation (i.e. aunt, family friend): _____ Phone: _____

Church Name & City (if applicable): First Lutheran, Marshall Amount Paid By Church: \$0

Indicate any special physical, dietary or emotional needs here: _____

Camp Information:

Camp Program: SHETEK DAY PLAY (July 16)

Payment Information: \$25---payable to Shetek.....please give to Tonya with Registration Form

Our child has permission to take part in all camp activities under supervision, and we agree that the camp or its personnel or First Lutheran Church will not be held responsible for accidents arising while at camp. I also give permission for the use of photographs, video, and electronic images including my child or family in camp promotions.

Parent or Guardian Signature: _____ Date: _____