



The Adventure Club 2011 Summer Camp

Summer Camp my Child will be attending:

- Auburn Eastern Montgomery (transportation provided)
 Falling Branch Grace A Child Kipps

Child/ Family Info Update Sheet:

Child Name: _____ Age: _____

Mother/ Guardian Name: _____

Address: _____

Phone Numbers: (h) _____ (c) _____

Place of Employment: _____ (phone) _____

Father/ Guardian Name: _____

Address: _____

Phone Numbers: (h) _____ (c) _____

Place of Employment: _____ (phone) _____

Emergency Contacts/ Authorized Pick-ups:

Name: _____ Relationship: _____

Address: _____ Phone: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Parents Signature: _____ Date: _____

Directors Signature: _____ Date: _____