



2010 Summer Camp Registration Form

Child's Information				
Name:		Sex:	Age:	D.O.B.:
Mom's Name:		Dad's Name:		
Address:		City:	St:	Zip:
Home Ph#:	Mom's Cell #:		Mom's Work #:	
Dad's Cell #:	Dad's Work #:		E-mail:	
Password: (word/phrase that can be used to confirm safe pick-up)		Alternative Contact Person:		Emergency Ph #:
Are there any medical conditions/allergies to which we should be alerted? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Specify:				
Is your child currently enrolled in classes/team at Coast Elite? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Specify Day(s)/Time(s):				
I understand that it is the intent of Coast Elite Gymnastics to provide for the safety and protection of my child; therefore if I am not available I authorize Coast Elite and it's employees to seek attention for my child and to execute orders to authorize emergency medical treatment, which may be required.				
_____ <i>Signature of Parent/Legal Guardian</i>			_____ <i>Date</i>	
Persons Authorized to Pick-Up (other than Parents and Emergency Contact)				
Name:		Ph #:	Name:	
Name:		Ph #:	Name:	
Selected Weeks (indicate <input checked="" type="checkbox"/> weeks attending)				
Wk 1: June 6-10 Fun in the Sun <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 2: June 13-17 Adventures In Space <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 3: June 20-24 Into the Jungle <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 4: June 27-Jul 1 USA Week <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 5: July 5-8 Around the World <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)
Wk 6: July 11-15 Join the Circus <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 7: July 18-22 Disney Fun <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 8: July 25-29 Lights Camera Action <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	Wk 9: Aug. 1-5 The Olympics <input type="checkbox"/> 5 Full Day <input type="checkbox"/> 5 Half Day <input type="checkbox"/> 5 Ext. Day <input type="checkbox"/> 3 Day (MWF) <input type="checkbox"/> 2 Day (T/TH)	For office use only: Current Member? <input type="checkbox"/> Yes <input type="checkbox"/> No Expir. Date: _____
Please Note:				
* Payment is due prior to the first day of each scheduled week. Payment is accepted via Check, Visa, Mastercard, or Cash. * There is a \$35 annual registration fee for your first child. An annual registration fee of \$25 will be charged for each subsequent child. We will assess your registration status upon receipt of your camp registration form.				