



Behavioral Learning Center, Inc.

Behavioral Learning Center 2017 Summer Camp Registration Form

Camper Information

| | | | |
|-----------------------|--|----------------|--|
| First Name: | | Last Name: | |
| Age: | | Date of Birth: | |
| Gender: | | Address: | |
| Toilet Trained: | | | |
| Ambulatory: | | Allergies: | |
| Addition Information: | | | |

Parent/ Guardian Information

| | | | |
|------------------------|--|-------------|--|
| Mother/ Guardian Name: | | Cell Phone: | |
| Work Phone: | | Home Phone: | |
| Father/Guardian Name: | | Cell Phone: | |
| Work Phone: | | Home Phone: | |

Program Information

Please check all the weeks that you wish to attend:

- Week 1: June 19th – June 23rd : Superhero
- Week 2: June 26th – June 30th: Pirates
- Week 3: July 3rd- July 7th, closed July 4th: Stars and Stripes
- Week 4: July 10th- July 14th : Western
- Week 5: July 17th- July 21st: Dr. Seuss
- Week 6: July 24th- July 28th: Under the Sea

Emergency Contact Information

In the event of an emergency, camp facilitators will first contact the camper's parent's/guardians. If the facilitator is unable to contact the above, the facilitator will then contact the below emergency contacts in order.

| | | | | | |
|------|--|--------------|--|-------|--|
| Name | | Relationship | | Phone | |
| Name | | Relationship | | Phone | |
| Name | | Relationship | | Phone | |

Payment

- Cash
- Check
- Credit Card

| | | | |
|--------------|--|----------|--|
| Card Type | | Exp Date | |
| Name on Card | | | |
| Account # | | | |
| CVV Code | | | |