

## 2025 INDIVIDUAL STUDENT REGISTRATION FORM

(Please print clearly.)

NAME:		PRIMARY PHO	ONE: (	)	
ADDRESS:	CITY:		STATE:	ZIP: _	
COUNTY:	_ GENDER: M	F			
DATE OF BIRTH: / / GRA	ADE TO COMPL	ETE IN SPRING	i 2025:	TSHIR	T SIZE:
SPECIAL NEEDS, REQUEST FOR ACCESS	IBLE FACILITIES	: NO YES			
CHURCH INFORMATION					
CHURCH:	CHUR	CH CITY:			
YOUTH LEADER/PASTOR SIGNATURE:					
PERMISSION TO SWIM AT YMCA POOL V	WITH LIFEGUAR	D SUPERVISIO	N? YES	NO	
PERMISSION TO PHOTOGRAPH/VIDEO S	STUDENT FOR P	ROMOTIONAL	PURPOSES	S? YES	NO
PARENT/GUARDIAN COL	•	? EMPS (13	ander E	3)	
PRINT PARENT/GUARDIAN NAME		PARENT/GUA	RDIAN SIG	NATURE	
PARENT/GUARDIAN ADDRESS (if differen	nt from above):				
STREET	CITY		ST	ATE	ZIP
WORK PHONE: ( )	_ CELL PHONE	: ( )			

## ATTENTION PARENTS OR GUARDIANS:

- 1. Any participant without a completed registration and health forms will not be allowed to stay at camp.
- 2. Please register through your church leader. A \$50 deposit toward the camp registration fee is required in order to hold a spot for your student. The remaining registration fee must be paid by the beginning of camp. In order to receive the early bird price (\$219), the \$50 deposit must be paid by May 1, 2025.