Camps are filled on a first come, first served basis.

Name_



Completed registration form and payment must be received in order to hold your child's spot.

Grade Completed _____

Summer Camp Registration Form

ck#	Name		Grade Completed
h □ online	Parent/guardian		DOB
\$ 135 camps	Mailing Address		
camps uding ysitting 101)	Phone # Phone #		
	Other Emergency Contact		Phone #
	Other information we should know (food allergies? Medications?) How will your child be getting home? People authorized to pick up your child		
	People authorized to pick up	your child	
	How did you hear about us? _ Child's t-shirt size Swi	mming Lesson Level (if kn	nown & taking lessons)
Please	mail completed form & pay	ment to:	Questions????
	The Kids Klub, Inc. 506 South A Street		Call the Kids
	Grangeville, ID 8353	0	Klub ~ 983- 2285
Or email form to <u>keelerk@sd244.or</u> QR code below.		org & pay online at	Ask us about our multi-ch discount!
*Class siz	e is limited and filled on a first come	e, first served basis.	
physiciar		st emergency hospital for	Klub staff to take my child to the such emergency treatment and of the child, at my expense.
Signature	e of parent/ legal guardian	Date	Physician's Name
	give permission for my child's p s. This may include newspaper		used for Kids Klub, Inc.'s media ochures, etc.
Signature	e of parent /legal guardian	Date	
		Open to any child	

(excluding Babysitting 101).