

SJCT Class and Camp Registration

CAMP/CLASS YOU ARE REGISTERING FOR

STUDENT'S NAME _____

PARENTS'/GUARDIANS' NAMES

STUDENT'S MAILING ADDRESS

STUDENT'S AGE _____ GRADE FOR 2022-2023 _____

EMAIL 1 _____

EMAIL 2 _____

PHONE 1 _____ PHONE 2 _____

Emergency contact (if different from Parent) _____

Additional Notes to Know (example: health concerns, dietary restrictions, pronouns, conflicts, questions, etc)

I agree to arrange for prompt pick-ups of my student and to contact Penelope if my student will be late or missing from class.

Signature of Parent/Guardian

Date

