

## ST. ALBAN'S 2024 SUMMER CAMP REGISTRATION

CHILD'S NAME:	DATE OF BIRTH:
ADDRESS:	ZIP:
MOTHER'S NAME:	FATHER'S NAME:
CELL PHONE:	CELL PHONE:
EMAIL ADDRESS:	EMAIL ADDRESS:
My child will attend the following sessions:  Please note each camp session is 2 weeks, except the first session which is only 1 week.  All sessions(May 29-July 25th)	
Session 1 Session 2 Session 3 _ (May 29-31) (June 3- 14) (June 17- June 1	
My child will attend camp on the following days:  (Minimum of 3 days)  Monday Tuesday Wednesday Thursday Friday  My child will attend camp for:	
1. Camp only (9:00am-12:00pm) 2. Extended Day (7:00am-6:00pm)	
Registration Fees (non-refundable):  \$75 new students \$50 continuing students  *All fees must be paid before your child's first day of camp	
I give permission to St. Alban's personnel to apply sunscreen on my child. (initial)	
I give St. Alban's personnel permission to use Kirkland brand wipes on my child(initial)	
I give permission for my child to go to Rooms 11/12, library & youth lounge(initial)	
I give permission to St. Alban's personnel to use my child's image on:	
Facebook(initial) School Website:	(initial)  lilio App: (initial)
I understand I have to provide my email address and download the lillio app in order to receive all	
camp communications (initial)	