

# LOWER TOWNSHIP POLICE DEPARTMENT

## YOUTH SUMMER CAMP 2018

### Camper Information

T-shirt size: (Circle one) adult sizes:            SMALL            MEDIUM            LARGE            X-LARGE

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Age on start of camp: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Grade entering in September 2018: \_\_\_\_\_

Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Guardian Cell: \_\_\_\_\_

Last school attended: \_\_\_\_\_

Parent/guardian name: \_\_\_\_\_ Address: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

### In Case of Emergency

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone number: \_\_\_\_\_

### Parent's Authorization

If my child is accepted, I understand that he/she must be represented by a parent or guardian at a pre-camp meeting where I will sign a Waiver of Liability Form.

I hereby certify that the information provided on this form is correct and complete. I understand that falsification of any information on this form may result in dismissal of my child from this program. I further agree that my child will attend each day of the police camp.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_