

Camper Name: _____

Phone: () _____

Email: _____

- Registration Form
- Emergency Contact / Release Information
- Medical Information Form
- Immunization Record
- Participation Agreement / Waivers
- Behavior Management Guidelines
- Receipt

***IF FILING FOR FINANCIAL ASSISTANCE**

**Please 'Date Stamp' when ALL financial aid documents are received*

- CDBG Application
- Financial Aid Application
- 1040 Tax Return for 2021
 - If no income was earned, please request a notary form
- 2 Consecutive Pay Stubs
- Copies of Any Government Assistance (if applicable)

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| Notes: |
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