

## CAMP LAMBEC YOUTH CAMP REGISTRATION FORM

Mail to "CAPNWP", P.O. Box 279, Zelienople, PA 16063 or Register on-line at [www.camplambec.net](http://www.camplambec.net)

Program Name: \_\_\_\_\_ Dates: \_\_\_\_\_

### Camper Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Entering this Fall: \_\_\_\_\_

Cabin Mate Requests: \_\_\_\_\_

### Parent/Guardian Information

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

Relationship to camper: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ email: \_\_\_\_\_

### Alternative Contact Information

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

Relationship to camper: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ email: \_\_\_\_\_

**\*A non-refundable deposit of \$80 is due with the registration. Full payment is due one week before the start of camp. Checks can be made out to "CAPNWP".**

**\*\* Additional forms such as our medical history forms, photo/ video release, off-site activity forms, etc -- are also required. The registration is not complete until they are submitted. They are available on our website.**

### Office Use Only

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_ Payment Received: \_\_\_\_\_ Check # \_\_\_\_\_

Supplemental Information Received:  Medical Information Forms  Medical Release  Copy of Insurance Card  
 Photo/Video Release  Offsite Activity Form (if applicable)

Please list any additional campers:

**Camper Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Entering this Fall: \_\_\_\_\_

Cabin Mate Requests: \_\_\_\_\_

**Camper Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Entering this Fall: \_\_\_\_\_

Cabin Mate Requests: \_\_\_\_\_

**Camper Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Entering this Fall: \_\_\_\_\_

Cabin Mate Requests: \_\_\_\_\_

**Camper Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Boy \_\_\_ Girl \_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade Entering this Fall: \_\_\_\_\_

Cabin Mate Requests: \_\_\_\_\_

