

# Rolling Acres Outdoor & Science Summer Camp 2018 Registration Form

Week/weeks registering for

Session 1 (July 9 - July 13) \_\_\_\_\_

Session 2 (July 16 - July 20) \_\_\_\_\_

Session 3 (July 23 - July 27) \_\_\_\_\_

(\$275 per session)

Grade \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ City & State of birth \_\_\_\_\_

Student lives with (check one) Both Parents \_\_\_\_\_ Mother \_\_\_\_\_ Guardian \_\_\_\_\_

Parent/Guardian #1 \_\_\_\_\_

Cell Phone \_\_\_\_\_ Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

Parent/Guardian #2 \_\_\_\_\_

Cell Phone \_\_\_\_\_ Employer \_\_\_\_\_ Work Phone \_\_\_\_\_

If separated or divorced, do parents have joint legal custody?

Check one YES \_\_\_\_\_ NO \_\_\_\_\_

Please provide information about the parent the child **does not** reside with

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone number \_\_\_\_\_ Cell number \_\_\_\_\_ Email \_\_\_\_\_

Please mail completed form to:

Rolling Acres Outdoor & Science Summer Camp  
65 Peasant Street  
Southampton, MA 01073