



## 2024-2025 Registration - Summer Camp

Select what you are registering for:

\_\_\_\_\_ Let's Explore! - \$120

\_\_\_\_\_ Back to School! - \$120

August 5 - 9 | 9-11:30am

August 12 - 16 | 9-11:30am

### Child 1 Information

<i>Last Name</i>		<i>First Name</i>		<i>Name preferred to be used at school</i>	
------------------	--	-------------------	--	--	--

<i>Birthdate</i>	<i>Gender</i>	_____ Yes _____ No		<i>Date of last DTP</i>
		<i>Previous group experience</i>		

*Allergies/medications/other significant medical information*

*Any further information you feel might be helpful in providing a positive experience for your child*

### Child 2 Information

<i>Last Name</i>		<i>First Name</i>		<i>Name preferred to be used at school</i>	
------------------	--	-------------------	--	--	--

<i>Birthdate</i>	<i>Gender</i>	_____ Yes _____ No		<i>Date of last DTP</i>
		<i>Previous group experience</i>		

*Allergies/medications/other significant medical information*

*Any further information you feel might be helpful in providing a positive experience for your child*

### Parent/Guardian 1 Information

<i>Last Name</i>		<i>First Name</i>		<i>Street Address</i>		
------------------	--	-------------------	--	-----------------------	--	--

<i>Cell Phone</i>	<b>Indicate 1st and 2nd order to call during school hours</b>	<i>Email</i>		<i>Apt/Unit</i>		
-------------------	---	--------------	--	-----------------	--	--

<i>Work Phone</i>		<i>Additonal Email</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
-------------------	--	------------------------	--	-------------	--------------	------------

### Parent/Guardian 2 Information

<i>Last Name</i>		<i>First Name</i>		<i>Street Address</i>		
------------------	--	-------------------	--	-----------------------	--	--

<i>Cell Phone</i>	<b>Indicate 1st and 2nd order to call during school hours</b>	<i>Email</i>		<i>Apt/Unit</i>		
-------------------	---	--------------	--	-----------------	--	--

<i>Work Phone</i>		<i>Additonal Email</i>		<i>City</i>	<i>State</i>	<i>Zip</i>
-------------------	--	------------------------	--	-------------	--------------	------------

**Household Information**

*Primary language used in the home*

*Home church*

*How did you hear about us?*

**Civil Rights Information**

Provision of this information is voluntary. This information will be used to determine whether or not CDLC is complying with applicable provisions of the civil rights laws. If you do not provide this information, a representative of CDLC is required to identify the racial/ethnic category of your enrolled child.

Check whether your child is:  Hispanic or Latino  Not Hispanic or Latino

Check the race of your child (check one or more):

<input type="checkbox"/>	American Indian or Alaskan Native	<input type="checkbox"/>	Asian
<input type="checkbox"/>	Black or African American	<input type="checkbox"/>	Native Hawaiian or Other Pacific Islander
<input type="checkbox"/>	White		