



Camp Care-A-Lot
 6249 Canal Blvd.
 New Orleans, LA 70124
 504-488-1319, ext 153
 campcarealot@stpauls-lakeview.org



Child's Name

M F

Date of Birth

Your child(ren) must turn 5 years old by 6/1/2010. Your child(ren) can not be or turn 12 before 6/1/2010.

Grade entering in the Fall

School attending at Present

School attending in the Fall

Address

Home Phone

Mother or Guardian

Work Phone

Cell Phone

Employer

E-mail

Father or Guardian

Work Phone

Cell Phone

Employer

E-mail

Name and relationship of person authorized to pick up camper and who can be contacted in case of emergency if parents cannot be reached:

Name

Relationship

Phone

Name

Relationship

Phone

Registration Deposit Fee: \$55.00 (non-refundable one time fee per child) _____

PLEASE NOTE: Registration is not valid unless accompanied by the \$55.00 registration fee.

Please mark the appropriate sessions:

** Please note: We will be closed for the week of June 28th – July 2nd*

Save when you register for the 4-week session!

- Session 1: June 1 – June 25 \$680.00
- Session 2: July 5 – July 31 \$680.00

Registration by week only:

- Week 1: June 1 – June 4 \$180.00
- Week 2: June 7 – June 11 \$180.00
- Week 3: June 14 – June 18 \$180.00
- Week 4: June 21 – June 25 \$180.00
- Week 5: July 5 – July 9 \$180.00
- Week 6: July 12 – July 16 \$180.00
- Week 7: July 19 – July 23 \$180.00
- Week 8: July 26 – July 30 \$180.00

NEW THIS SUMMER – LUNCH PROGRAM

** Menu Attached*

- Session 1: June 1 – June 25 \$95.00
 - Session 2: July 5 – July 31 \$100.00
- Registration by week only:**
- Week 1: June 1 – June 4 \$20.00
 - Week 2: June 7 – June 11 \$25.00
 - Week 3: June 14 – June 18 \$25.00
 - Week 4: June 21 – June 25 \$25.00
 - Week 5: July 5 – July 9 \$25.00
 - Week 6: July 12 – July 16 \$25.00
 - Week 7: July 19 – July 23 \$25.00
 - Week 8: July 26 – July 30 \$25.00

****All payments are due by Friday, May 14th. Non-payment by the due date will result in your registration being canceled and your name being placed on our waiting list.***

Join us for arts and crafts,
 games, swimming twice a
 week, fun weekly field trips
 and much more!

Please fill out the reverse side of this form

I, the undersigned, hereby certify that to the best of my knowledge my child is able to safely participate in the program activities for which he/she has registered. I also give permission for my child to leave the camp grounds with authorized Camp Care A Lot staff on all field trips and camp authorized outings. I further consent to the use of pictures of my child for displays, brochures, and promotional materials without any compensation.

Signature of Parent or Guardian

****Any additions to this form are to be signed by the parent or guardian and given in writing to the Camp Director.***

Field Trip Permission

I give permission for my child to go on field trips sponsored by Camp Care-A-Lot on foot, by car, or by bus.

Signature of Parent or Guardian

Emergency Hospital Notice

In the event of a medical emergency, your child will be taken to Children's Hospital (200 Henry Clay Ave, New Orleans – 504-899-9511)

Also, in the event of a non-emergency medical situation, please provide the name of the hospital/clinic where you want your child to be taken. Camp Administration will telephone the parent in both emergency and non-emergency situations.

Name of Hospital/Clinic: _____

List all allergies and special medical information below:

If necessary, can your child be given:

_____ Tylenol _____ Motrin _____ Pepto Bismol

Pediatrician's Name: _____ **Phone:** _____

Signature of Parent or Guardian: _____

Camp Care-A-Lot T-Shirts Order

Each registered camper receives 2 t-shirts. If you need additional t-shirts, they may be purchased for \$7.50.

Please indicate the size: Child Small _____ Medium _____ Large _____
Adult Small _____ Medium _____ Large _____

Please indicate the extra quantity: _____ Paid \$ _____ (\$7.50/shirt)