June 22-29, 2009 **Music Camp Registration** **2-5 PM**

Child's Name _____

prefers to be called _____ t-shirt size: **child** s m l xl

Age: ____ Grade completed: _____Birthday: _____

Address _____

City _____State _____ Zip _____

Home phone: _____ Cell phone(s): _____

E-mail address: _____School last attended: _____

Medical concerns: _____

Mother's name: _____
Phone during camp hours: _____

Father's name: _____
Phone during camp hours: _____

Emergency contact: _____ Phone _____

Church attended: _____

Previous music experience: _____