



## 2020 REGISTRATION FORM

- Week 1 July 13-- 17  
 Week 2 July 20 -- 24

Today's Date: \_\_\_\_\_ Number of children enrolling: \_\_\_\_\_

Name of child 1: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: F  M

Name of child 2: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: F  M

Name of child 3: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Gender: F  M

Names & ages of other children in family: \_\_\_\_\_

School child(ren) attend (or note homeschool): \_\_\_\_\_

Please do  do not  give my name & contact info out to other registrants for carpools, play dates, etc.

Parent/Guardian Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relationship (mother, father, stepmother, guardian, etc.) \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City Zip

Mailing Address: \_\_\_\_\_  
Address or P.O. Box City Zip

Phone: home: \_\_\_\_\_ work: \_\_\_\_\_ cell: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Place of Employment: \_\_\_\_\_  
Street Address City Zip

Parent/Guardian Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Relationship (mother, father, stepmother, guardian, etc.) \_\_\_\_\_

Address: \_\_\_\_\_  
Street Address City Zip

Phone: home: \_\_\_\_\_ work: \_\_\_\_\_ cell: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

## **QUESTIONS**

For questions about Earth Camp, or the registration procedure:

Please direct all email inquiries to: virtual [@earthcamp.org](mailto:virtual@earthcamp.org)

Phone calls or text messages please contact:

Virtual Earth Camp Director, Alyssa (please direct registration questions here)  
(541-841-2977)