



# SIBLING PROGRAM REGISTRATION FORM ORION DISTRICT DAY CAMP

June 22-25, 2010

(PLEASE PRINT ALL INFORMATION)

For office use only
A _____
C _____
H <input type="checkbox"/>

## SIBLING INFORMATION

Name: _____ Date of Birth: _____ Age (as of 06/22/10): _____	
Address: _____ City: _____ Zip: _____	
Please check one box below. Ages are as of 6/22/10. Grades are for 2010-2011 school year.	
<p style="text-align: center;"><b>Day Camp (2:00pm-8:00pm)</b></p> <input type="checkbox"/> Adventurers ( <i>Boys and Girls</i> 3 years-1st Grade)* <input type="checkbox"/> Girls' Expedition ( <i>Girls</i> 2 <sup>nd</sup> Grade-Age 13)	*Friday, 1 <sup>st</sup> graders (Tigers) attend Tiger Day Camp session

## PARENTS/GUARDIAN INFORMATION

Parent/Guardian Name(s): _____ Home Phone: _____		
Email Address: _____ Day/Cell Phone: _____		
Parent's/Guardian's Role at Camp: <input type="checkbox"/> Staff <input type="checkbox"/> Camp Walker Pack #: _____		
Persons Authorized To Pick Up Your Child: (other than parents or guardians listed above)		
Name	Relation	Phone

## REQUIREMENTS

<input type="checkbox"/> Sibling program is only available to children while parent or legal guardian is working at Day Camp.
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## TEE SHIRT SIZE (check one)

<input type="checkbox"/> Youth Small (6-8)*	<input type="checkbox"/> Youth Medium (10-12)	<input type="checkbox"/> Youth Large (14-16)	<input type="checkbox"/> Adult XL (46-48)
<input type="checkbox"/> Adult Small (34-36)	<input type="checkbox"/> Adult Medium (38-40)	<input type="checkbox"/> Adult Large (42-44)	

\* Youth Small Tee Shirt will not have camp logo on it

## FEES

\$45.00 Camp Fees (1 T-shirt included)
\$ _____ (Qty _____) additional T-shirts at \$5.00 each (optional)
\$ _____ TOTAL FEES – Payable to your Pack. Packs combine into one check (payable to S.H.A.C. Acct. 1-6801-546-20)

Signature of parent/guardian \_\_\_\_\_

Date \_\_\_\_\_

Turn in the following to your Pack's Camp Representative: <input type="checkbox"/> This completed form <input type="checkbox"/> Youth 2010 BSA Health History <input type="checkbox"/> Fees Pack Representatives must submit these by April 1, 2010 Refunds are at the discretion of the Camp Director	If you have any questions, please contact your Pack Representative or... Day Camp Director     Natalie West, 936-931-9517 <a href="mailto:daycamp@oriondistrict.org">daycamp@oriondistrict.org</a> Day Camp Co-Director     Rene Halbardier, 281-468-2572 <a href="mailto:halbardier@hotmail.com">halbardier@hotmail.com</a> Registrar                     Cheryl Strain     281-379-3833 <a href="mailto:cherylstrain@hotmail.com">cherylstrain@hotmail.com</a> Web site <a href="http://www.oriondistrict.org/">http://www.oriondistrict.org/</a>
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