



2020 Registration Form

MANDATORY

Please attach current photo of your Child here (including returning campers)

Camper information:

Child's Name: _____

Child's Date of Birth: _____ Gender: M F

School: _____ Grade after Summer 2020? _____

Child's T-shirt size (Please Check One) Child: S (6-8) M (10-12) L (14-16) or Adult: S M L XL

Family Information:

Are You a Returning Family: Yes No

How did you hear about Long Island Voyagers DayCamp? _____

Parent or Guardian Contact Info:

Name: Mr. Ms. Mrs. _____

Home Phone: (_____) _____

Work Phone: (_____) _____

Cell Phone: (_____) _____

Street: _____

City: _____ State: _____ Zip: _____

Email: _____

Is pick up and drop off address same as home address? Yes No

If pick up and/or drop off is at another location, please fill out following information:

Parent or Guardian: _____

Business/childcare: _____

Street: _____

City: _____ State: _____ Zip: _____