

Camp Haverim 2011 Registration Form

Camper's Name: _____ Grade entering in fall: _____

Address (with zip code): _____

Phone #: _____ E-Mail we can send information to: _____

Sex (circle one): Male Female Date of Birth: _____ Age: _____

Mom's (Guardian's) Name: _____

Home Phone: _____ Work: _____ Cellular: _____

Dad's (Guardian's) Name: _____

Home Phone: _____ Work: _____ Cellular: _____

Doctor's Name and Phone Number: _____

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Work: _____ Cellular: _____

Emergency Contact: _____ Relationship: _____

Home Phone: _____ Work: _____ Cellular: _____

I am interested in (circle one):

Both Sessions **Session I** **Session II**
July 18th- August 12th July 18th - to July 29th August 1st - August 12th

Sign me up for: Busing Goleta Busing Downtown

T-Shirt Size: Child XS S M L XL Adult XS S M L XL

Additional shirts at \$10 each- Size(s): _____ Amount: _____

Please return Registration form, along with a **\$100 non-refundable deposit made out to "camp Haverim"** Post Office Box 994, Santa Barbara CA 93116-0994 feel free to call Itzik @ 895-6593 with any questions.