

Registration Form-Camp David 2026

_____ Session 1: June 12– June 14

_____ Session 2: June 16-18

Camper's Name: _____ Age: _____ 2025-2026

Grade: _____

Allergies: _____

Address (Include City, St. & Zip):

Parent/Guardian Name: _____

Parent/Gaurdian Contact Number: _____

Parent/Gaurdian Email: _____

Camp David t-shirts are available! If you wish to order a 2026 Camp David t-shirt—please include an additional \$15.00 and indicate your child's t-shirt size. These must be ordered at registration as extras will not be printed.

____YS ____YM ____YL ____AS ____AM ____AL ____AXL

Please **INITIAL** line by activities below to give permission for your child to participate in the activity. Your signature does not mean your child must participate; however, it grants your permission should your child choose to participate.

_____ My child has permission to participate in the teams' course at Camp David.

_____ My child has permission to participate in the water activities provided at Camp David.

_____ My child may be released to _____ (Print name(s))

Parent Signature: _____

Date: _____