

**2020 Camp TAG – Virtual Enrollment
Winter Application (Dec. 28-30th)**



| Camper Information | Camper #1 | Camper #2 | Camper #3 |
|-----------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| First & Last Name | | | |
| Gender | <input type="checkbox"/> Male <input type="checkbox"/> Female | <input type="checkbox"/> Male <input type="checkbox"/> Female | <input type="checkbox"/> Male <input type="checkbox"/> Female |
| Date of Birth | | | |
| List Food Allergies or if your child is a sibling | | | |
| List other conditions such as EoE, Celiac Disease, FPIES, or Asthma | | | |
| Which Camp TAG location have you attended in the past? Mark "New" if you are new to Camp TAG. | | | |
| Shirt Size | <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> AS <input type="checkbox"/> AM <input type="checkbox"/> AL <input type="checkbox"/> XL | <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> AS <input type="checkbox"/> AM <input type="checkbox"/> AL <input type="checkbox"/> XL | <input type="checkbox"/> YS <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> AS <input type="checkbox"/> AM <input type="checkbox"/> AL <input type="checkbox"/> XL |

| General Information | | General Information | |
|----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|-----------------------------------------------------------------|
| Mother's Full Name (Mrs./Dr.) and/or Partner's Full Name | | Father's Full Name (Mr./Dr.) and/or Partner's Full Name | |
| Mother's Home Phone | | Father's Home Phone | |
| Mother's Work Phone | | Father's Work Phone | |
| Mother's Cellular Phone | | Father's Cellular Phone | |
| Mother's E-Mail | | Father's E-Mail | |
| Mother's Address | | Father's Address | |
| City | | City | |
| State and Zip Code | | State and Zip Code | |
| Marital Status | <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Remarried <input type="checkbox"/> Spouse Deceased | Custodial Parent | <input type="checkbox"/> Mother <input type="checkbox"/> Father |

Terms of Enrollment Agreement

1. Campers and parents agree to abide by rules and regulations set by Directors for health, safety and welfare of campers.
2. Directors reserve the right to deny, cancel, sever or suspend a child's enrollment if deemed for the best interest of the camper or the camp, in which case the unused camp fee will be refunded.
3. The camp fee must be paid in full upon registration. No reduction or allowance will be made for late arrival or early withdrawal of a camper. No allowance will be made for any interruption in the camp week due to illness, family vacation, etc. There is a \$25.00 fee for returned checks.
4. Parent's signature further gives camper permission to participate in all virtual camp activities.
5. Parent's signature further gives camp permission to use camper's likeness or image in camp publications including but not limited to brochures, marketing materials, DVDs, our website and social media pages.

X Parent or Guardian's Signature: _____

Payment Method

Please pay for your Camp TAG Registration via [PayPal on FAACT's "Donate" Page](#). Click "Other" then enter your total payment for registration, and then click the "Donate Now" button to complete registration:

- 1st Camper - \$75 3rd Camper - \$75
 2nd Camper - \$75 Total - \$ _____