



# Scofield Christian School Summer Camps

June 1–5, 2020

## Registration Form

*Due April 30th*

*Please complete and submit a form for each child attending camps.*

Parent's Name: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Child's Full Name: \_\_\_\_\_

Child's Age: \_\_\_\_\_

Grade Entering  
Fall 2020: \_\_\_\_\_

Camp Name: \_\_\_\_\_

Camp Name: \_\_\_\_\_

Camp Name: \_\_\_\_\_

Total # of Sessions Registered: \_\_\_\_\_

Total Amount Due: \_\_\_\_\_

Please attach and mark  
payment method:  Check

Cash