

# St. Lucia Teachers' Credit Co-operative Ltd.

## Depositors Summer Camp

### Registration Form 2019

For Official Use Only

No. \_\_\_\_\_

Registration Fee Paid

**Summer Camp** is for SLTCC depositors between the ages of 5 -18 years from Wednesday 17<sup>th</sup> July to Wednesday 24<sup>th</sup> July, 2019. The camp begins from 9:30am-3:00 pm at the Anglican Memorial School.

#### Information

Parents /Guardians are requested to sign consent forms and pay a **registration fee of \$35 dollars** prior to each participants' acceptance on the programme. Upon payment, a receipt will be given.

CHILD'S NAME: \_\_\_\_\_

D.O.B.: \_\_\_\_\_ AGE: \_\_\_\_\_ SEX: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

PHONE: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (M) \_\_\_\_\_

Are there **any medical conditions, medication, or recent injuries** of which we should be aware?

YES/NO

If YES, please advise for your child \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please Tick if you **DO NOT PERMIT** your child's photo to be taken at this program for promotions including our website and future ventures: ( )

**Parent/Guardian Declaration:** In signing this form, I understand that:

My child is permitted to participate in this Depositors Summer Camp Programme under the supervision of Camp Administrators and the staff of the St Lucia Teachers' Credit Cooperative Ltd. My child takes responsibility for all personal property.

\_\_\_\_\_

Please print name in full

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**A SNACK AND LUNCH WILL BE PROVIDED DAILY**