SUMMER CAMP REGISTRATION CHECK LIST

BE PREPARED with the following information for each camper.
* Indicates information that will be required to complete registration

All the required and optional forms are available on: [http://www.calvertparks.org/summercamp/forms.html](http://www.calvertparks.org/summercamp/forms.html)

### Parent/Guardian Information
- [ ] First & Last Name *
- [ ] Email (required for online registration only)
- [ ] Daytime Phone *
- [ ] After hours Phone *
- [ ] Cell Phone

### Camper Information
- [ ] Camper's First & Last Name *
- [ ] Gender *
- [ ] Grade in Fall *
- [ ] Birthday *
- [ ] Age at time of camp *
- [ ] T Shirt Size *
- [ ] Full Address *

### Medical Record
- [ ] Primary Physician Name & Phone Number *
  - [ ] If camper missing immunization because of medical contradictions or exemption by religious belief, complete the Immunization Certificate. *This can be completed and submitted separately.*
- [ ] Date of Last Tetanus Shot *
- [ ] Food Allergies
- [ ] Other Allergies
- [ ] Pertinent information on any significant medical condition
- [ ] If any medication required during camp hours, a Prescription Authorization Form and Medication Release Form must be completed by the Physician. *These can be completed and submitted separately.*

### If enrolled in a Maryland Public School
- [ ] If enrolled in a Maryland Public School, name of school
- [ ] If not enrolled in a MPS, complete the Immunization Certificate. *This can be completed and submitted separately.*

### Emergency Contact Information (in addition to parent registering)
- [ ] Full Name *
- [ ] Relationship to Camper *
- [ ] Daytime Phone *
- [ ] Evening Phone *
- [ ] Cell Phone (if different from above)

### Agreements
- Camp Activity Waiver & Release. *You will need to agree to this during the registration process.*
- Camper Sign Out Policy. *You will need to agree to this during the registration process*

### Other Forms that may be necessary which can be completed and submitted separately.
- List of people who can and cannot pick up your child from camp.
- Field trip pick up form
- Field trip activity waiver

### All forms should be returned to the Natural Resources office

**Mailing Address**
Natural Resources Division  
175 Main Street  
Prince Frederick, MD 20678

**Walk-In Address**
Battle Creek Cypress Swamp  
2880 Grays Road  
Prince Frederick, MD 20678