

GORDON COLLEGE SUMMER CAMP REGISTRATION

Camp information

Name of camp attending: _____

Dates attending: _____

Camper Information

Last Name: _____

First Name: _____

Age (at start of camp): _____

Grade (at start of camp): _____

Position: _____

Skill Level (circle one): Beginner/Intermediate/Advanced

T-shirt Size (circle one): YS YM YL AS AM AL AXL

Guardian Information

Parent/Guardian Last Name: _____

Parent/Guardian First Name: _____

Email: _____

Cell Phone #1: _____

Cell Phone #2: _____

Home Phone: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Promotions Consent

I grant Gordon College permission to allow, without compensation, the likeness of my child/children/family in media and promotional materials. YES/NO

Completed registrations and tuition checks/vouchers can be mailed to:

Gordon College Summer Camps

255 Grapevine Road

Wenham, MA 01984