LITTLE MONK
SPORTS SUMMER CAMP REGISTRATION FORM 2025

Last Name …… **First Name**……..

Age …….. Gender: M F (Circle one)

ALLERGIES CONDITION……..

……..

If so any instruction…….

Parents/Guardian information:

Last Name…… First Name……

Relation to the child …… TEL: ……

EMERGENCY CONTACT:

Name …… Relation ……..

TEL: ……..

Signature f Parent/ Guardian……. Date……..

PLEASE CIRCLE THE WEEK OR WEEKS REQUIRED

Week 1 : 30 June-04 July , Week 2: July 07-11, Week 3: July 14-18, Week 4: July 21-25

Week 5: Aug 25-29