



## Summer Speech Day Camp Registration Form

### Check desired week:

- Week 1 - July 9 - July 13, 2018  
 Week 2 - July 16 - July 20, 2018  
 Week 3 - July 23 - July 27, 2018  
 Week 4 - July 30 - August 3, 2018

Child's Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_

Is your child enrolled in a preschool/school program?    \_\_\_\_\_ yes    \_\_\_\_\_ no

Does your child receive speech therapy?    \_\_\_\_\_ yes    \_\_\_\_\_ no

Does your child have an IEP/IFSP?    \_\_\_\_\_ yes    \_\_\_\_\_ no

Primary Language: \_\_\_\_\_

Food/Medication Allergies: \_\_\_\_\_

Does your child have any medical concerns requiring medication or other medical history I should know about?

### Parent/Guardian Contact

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

Address: \_\_\_\_\_

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

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

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

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

**Emergency Contact**

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

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

Relationship to Child: \_\_\_\_\_

**Authorized Person(s) for Pick-Up**

<u>Name</u>	<u>Cell Phone Number</u>	<u>Relationship to Child</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I acknowledge that the above-named person(s) are authorized to pick-up my child.

Parent/Guardian: (please print) \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Photo Release**

I hereby give permission for my child to be photographed during the Talk and Play, LLC. Summer Speech Day Camp. I understand the photos will be used to document learning and for promotional purposes including flyers, brochures, newspapers and Internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed. I do not expect compensation and that all photos are the property of Talk and Play, LLC.

Parent's/Guardian's Initials: \_\_\_\_\_

Is there anything else you want me to know about your child?

\_\_\_\_\_

For Office Use Only:

Medical Release on File \_\_\_\_\_

Payment Information: Date Paid \_\_\_\_\_

Check # \_\_\_\_\_

Hold: \_\_\_\_\_