



**Child Information**

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

| Child's Information  | Contact Information       |
|--|---------------------------|
| Age as of June 26: _____   | Parent or Guardian: _____ |
| T-shirt size (please circle):<br>Youth S M L      Adult S M L                            | _____                     |
| Do you read music?      Yes <input type="checkbox"/> No <input type="checkbox"/>         | Address: _____            |
| Do you play an instrument?      Yes <input type="checkbox"/> No <input type="checkbox"/> | _____                     |
| If yes, what instrument(s) and for how long:<br>_____<br>_____                           | Phone: _____              |
| Please list any food allergies:<br>_____<br>_____  | E-mail: _____             |
|  | <b>Emergency Contact:</b> |
|  | Name: _____               |
|  | Phone: _____              |

I give permission for the above named child to participate in all aspects of the Grace Note Music Camp. I give permission for staff and volunteers of the camp to give medical treatment to said child. I also allow the use of photographs taken for promotional purposes.

\_\_\_\_\_  
Signature of Parent/Guardian

.....

Registration is \$100 and is due at the time of registration.

Limited scholarships are available. Contact the Church office for more information. Checks should be made payable to **Free Grace** and sent to Free Grace Presbyterian Church ATTN: Grace Note. Please include the child's name on the memo line of the check.