

# Four Seasons Sports Camp

## Student Information Sheet

### Student Information:

Student's First Name:		Middle Name:	Last Name:	
Birth date:	Birthplace (State, Country)		Male or Female:	Name of School:

### Parent/Guardian Information:

Parent/Guardian's First Name:		Last Name:		Relationship to Student:			
House #	Street			Apt. #	City	State	Zip Code

### Mailing Address: (if different from above)

Street	City	State	Zip Code
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### Telephone:

Area Code:	Residence Phone:	Listed or Private Number:	Email Address (Home):	
Area Code:	Cellular Phone:	Alternate Contact Number:		Email Address (Work):

### Medical: List any illnesses and/or current medications

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### Emergency Contact:

Person to Contact:	Relationship:	Phone Number:
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### International Only:

First Language Spoken:	Language Spoken at Home:	Country of Origin:
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### Who is authorized to pickup your child (ren):

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Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_