

KEMET Summer Youth Program

Application Form 2016

Camper's Name _____

Date of Birth _____ Age to Date _____

Ethnicity _____ Completed Grade _____

T-Shirt Size: Circle one - Youth XS SM MED LG

Adult SM MED LG XL XXL

Parent (s) Name _____

Address _____

City _____ State _____ Zip _____

Phone: Home _____ Cell _____ Work _____

Email if used frequently _____

Emergency Contacts: Please provide two people other than parents.

First Contact: Name _____

Relationship to camper _____

Home Phone _____ Cell _____ Work _____

Second Contact: Name _____

Relationship to camper _____

Insurance Information:

Company _____ Policy Number _____

I verify that all information provided in this document is true to the best of my knowledge.

Signature _____

Date _____