



Day Camp

St. Andrew Lutheran Church 6255 Telegraph Rd. Bloomfield Hills, MI 48301
248-646-5207 or www.standrew-lutheran.org

AFTER-CAMP CHILD CARE REGISTRATION

\$10/Day

Name of Child _____
Child's Birth _____ Grade _____
Date _____ Completed _____
Address _____
Home Phone _____

Parent/Guardian Name _____
Parent/Guardian's Location while child is at camp (employer, home, school, etc.) _____
Home Phone _____ Cell Phone _____ Pager _____
Address _____

Person to be notified in emergency situation when parent is not available
Name _____
Address _____
Home Phone _____ Cell Phone _____ Pager _____

Name of persons other than parent to whom child may be released

1. _____ 3. _____
2. _____ 4. _____

Any Medical Concerns, including food allergies

1. _____ 3. _____
2. _____ 4. _____

Days Needed: _____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday

****Please send check for \$10/day along with Day Camp Registration Form to St. Andrew Lutheran Church, 6255 Telegraph Rd, Bloomfield Hills, MI 48301****