



# Summer Camp 2018 Application

Camper's Full Name: \_\_\_\_\_

School: \_\_\_\_\_

Camper's Date of Birth: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Allergies/Medications/Important Medical History (please list all): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Name(s): \_\_\_\_\_

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

Household Income and Number of Dependents: \_\_\_\_\_

\_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Phone Number: \_\_\_\_\_

*After turning this page of the application into your camper's OAC leader, Ryan Hamlet will contact you to finalize your camper's spot! If you have any questions about the application or \$50 camp fee, please contact Ryan at (804) 495-1413 or [ryan@blueskyfund.org](mailto:ryan@blueskyfund.org)*