

Hillsboro Family Camp Child Registration (age 2 through grade 6)

1. _____
DOB GRADE M/F NAME (first and last)

Allergies:

2. _____
DOB GRADE M/F NAME (first and last)

Allergies:

3. _____
DOB GRADE M/F NAME (first and last)

Allergies:

*A Medical Release Form
MUST BE completed for
every child age 0-18
years. Please provide
email address so a form
may be sent to you. You
may also print the form
from p2pm.org. Mail or
scan the completed
form to our office.
Call 937-840-9072
for more information.*

Adult(s) who may pick up the children above:

Adult Name 1 (please print) _____ Relationship _____

Mobile Phone Number _____ OK to text? Y N (circle one)

Email Address _____

Adult Name 2 (please print) _____ Relationship _____

Mobile Phone Number _____ OK to text? Y N (circle one)

Email Address _____

***ID bracelets for
pre-registered
children are
included in the
information packet
that you receive at
the front gate as
you arrive for
Family Camp.***