

Child's Registration Form (one per child)

Name: \_\_\_\_\_

Magical Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_

**Medical Information:** Please inform us of any medical issues, including allergies, if any:

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**Food Restrictions/Preferences:**

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**Likes and Interests:**

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**"I Can"** (developmental milestone) statements (ie: I can tie my shoes, go potty by myself, speak another language (sign included), etc):

I can \_\_\_\_\_  
I can \_\_\_\_\_  
I can \_\_\_\_\_  
I can \_\_\_\_\_  
I can \_\_\_\_\_

Feel free to add more on reverse of page.

**Using Childcare:**

I plan to use childcare at camp (check all that apply):

Whenever available     During ritual     During Path     Not at all  
 Not sure/would like to keep options open

*Note: This will not determine how much you are limited or obligated to use childcare. It is intended to facilitate the coordination of childcare at camp*

**Any Additional Information:**

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