

St. Elizabeth of Hungary Vacation Bible Camp Camper ~ CIT ~ Counselor Registration Form



Camp: August 5 to 9, 9:30 a.m. to 12:30 p.m.

Opening Mass: Sunday, August 4, 10 a.m.

Closing Mass: Sunday, August 11, 10 a.m.

Family Information

Last Name: _____

Parents: _____

Street: _____

Town: _____

Phone: _____

Email: (required) _____

Parish: (if not St. Elizabeth) _____

Emergency #: _____

Emergency Contact: _____

Relationship: _____

Medical/Special Needs & Allergies
(specify for each child)

Registration

\$75 per Camper (K-5th grade)
\$75 per Counselor-in-Training (CIT) (6th/7th gr.)
\$55 per Counselor (8th-12th grade)
\$10 per additional T-shirt (one is included)

Name #1: _____

Grade entering in fall _____

Circle: Camper CIT Counselor

T-shirt: Child / Adult S, M, L, XL 1+ _____

Name #2: _____

Grade entering in fall _____

Circle: Camper CIT Counselor

T-shirt: Child / Adult S, M, L, XL 1+ _____

Name #3: _____

Grade entering in fall _____

Circle: Camper CIT Counselor

T-shirt: Child / Adult S, M, L, XL 1+ _____

Name #4: _____

Grade entering in fall _____

Circle: Camper CIT Counselor

T-shirt: Child / Adult S, M, L, XL 1+ _____

*Return this completed form with your check made payable to St. Elizabeth Church to:
 St. Elizabeth Parish Center, 175 Wolf Hill Road,
 Melville, NY 11747 - Attention: VBC.
 Questions? Email Emily: eferrante88@gmail.com*