



The Governor's Office of Faith-Based & Community Initiatives
One Commerce Street, Suite 620
Montgomery, AL 36104
Fax: 334-242-2885

Be Ready Camp 2010 Camp Registration

Please Print: Date of Registration _____

Camper's Name _____ Age at Camp _____

Birth Date _____ Boy _____ Girl _____ T-Shirt Size _____

Address _____

City _____ State _____ Zip _____ County _____

Phone # _____ Fax # _____

Name of School _____

Parent's Name _____

Email _____

Work # _____ Cell # _____

Parent's Name _____

Work # _____ Cell # _____

Emergency Contact Information (In the event parents cannot be reached)

Name _____

Phone# _____

How did you hear about Be Ready Camp? _____

**THIS SECTION MUST BE SIGNED BY PARENT AND/OR GUARDIAN BEFORE
REGISTRATION IS ACCEPTED.**

We or I (Parents/Guardians) have read and agree to all the conditions of this registration.

Signature: _____ **Date:** _____