



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:** \_\_\_\_\_