

Inventive Builder Winter Camp Registration 2017

To reserve a place in any of the sessions, please complete this form and mail with payment (\$155) to:

Inventive Builder
 P.O. Box 465
 Statesville, NC 28687

An email confirmation providing details about camp will be sent via email

Camp Session Please circle session	1. December 27-29 Winston-Salem Ages 6 - 9 2. December 27-29 Winston-Salem Ages 10 - 14
Camper Name:	Please Circle: Boy Girl
Parent Name:	
Address:	
Home Phone:	
Cell Phone:	
Child's age (at time of camp):	
Email Address: *	
List authorized persons for pick-up	
Additional emergency contact person and phone:	
Carpooling with another camper or attending with a friend? Add name here.	
Allergies, diagnoses or health issues that would be relevant during camp or necessitate additional assistance	
# of years attending our camp	
How did you hear about our camp?	

My child has my permission to attend this camp. I hereby release the Inventive Builder and/or any of its agents from any liability resulting from participation in the above-mentioned activity. I understand that no supervision will be provided before or after camp.

In the event reasonable attempts to contact me in case of emergency have been unsuccessful, I hereby give my consent for camp staff to allow my child to be transported to an area hospital and be treated according to the recommendation of doctors on staff.

Parent/Guardian Signature:	
Printed Parent/Guardian Name:	
Date:	
Student's School/Home School:	

*We will send confirmation of enrollment via email. If no email is available, we will send confirmation via US mail. If you consent to having your child's picture with their Lego creations published on our website and/or in a regional newspaper please sign here. Thanks!
