

Please complete one form per child

Camp Registration

- JA BizTown Summer Camp Week 1 (June 28-July 2)—\$225***
 JA BizTown Summer Camp Week 2 (July 12-16) —\$225*
 Extended Day (for full week) - additional \$55

Camper Name _____ Age _____

Has your child attended JA BizTown before? (not required for attendance) Yes _____ No _____

Home Address _____ Home Phone _____

City _____ State _____ Zip Code _____

Best e-mail address _____

Mother's Name _____ Cell phone _____

Father's Name _____ Cell phone _____

Emergency Name _____ Relationship _____ Cell _____

* 10% discount for additional family child T-shirt size (adult) S M L XL

Method of Payment:

Credit Card: MasterCard VISA AMEX Credit Card Number: _____

Expiration Date: _____ Cardholder Signature: _____

Check: made payable to Junior Achievement of Middle Tennessee (\$25 returned check fee)

Medical Release

I do hereby grant permission to Junior Achievement of Middle Tennessee and their respective agents and employees to secure such medical aid and hospital services as they deem necessary for the child noted on this form in the event he/she should sustain injury or illness while attending a summer program. I agree to assume the cost for transport and medical treatment in such an emergency situation.

I have also indicated below any medical information of which Junior Achievement should be aware in consideration of the child's physical and mental well being.

Student Information

Family Doctor _____ Phone _____

Special notes (allergies, medications, other health conditions)

Family Health Care Information

Insurance carrier _____ Group Name _____

Policy Number _____ Group Number _____

Parent Signature _____

Send this form and payment to:

Junior Achievement of Middle Tennessee, Attn: Summer Camp, 120 Powell Place, Nashville, TN 37204