



LEGOLAND ADVENTURE

Spring Break
April 1-5, 2019



Times: Program Runs from 9:00 am - 4:00 pm
(Doors open from 7:00 am - 6:15 pm)

Cost: 5 Days of Fun.....\$175
(*Some Camperships/Financial Assistance may be available)

Registration

Please fill out the form below, sign and mail back to:
The Firs ASA - 4605 Cable St. - Bellingham, WA 98229

Camper Name: _____ Camper Birthdate: _____ Grade: _____ Gender: _____

Parent/Guardian(s): _____ Email: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell: _____ Work Phone: _____

Fee & Payment Information: *(Registration with payment in full is required to guarantee a spot at camp)*

Credit Card Payment: \$ _____

Check, Cash, or Money Order: \$ _____

Credit Card #: _____ Exp. Date: _____ Security Code *(Last 3 digits on back of card):* _____

Name on Card: _____ Signature: _____

Emergency Contact: *(Please list one person, other than parents, to be reached in case of an emergency)*

Name: _____ Relationship to Child: _____

Home Phone: _____ Cell Phone: _____

Pick-Up Authorization: *(Please list three people, other than parents, who may pick up your child from Spring Break Camp)*

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Health Concerns? _____

Medications? _____

Allergies? _____

Other: _____

I give The Firs ASA Program permission to use photographs of my child for display/program purposes yes no

I give The Firs ASA Program permission to transport my child on field trips (walking or by a licensed Firs van) yes no

My child needs a booster/car seat when transported (must be 8 or older and at least 80 pounds to be exempt) yes no

In an emergency, after every effort is made to reach me, I give The Firs permission to seek medical attention for my child yes no

Parent/Guardian Signature: _____ **Date:** _____