



# Woodland Blast Camp 2020

Blast Camp is offered to current Woodland students.

## Camper

\_\_\_\_\_  
First Name                                      Last Name                                      Date of Birth                                      Age & Grade for 20-21

## Custodial Parents

\_\_\_\_\_  
First Name                      Last name                      Relationship                      Work Phone                      Cell Phone                      Email

\_\_\_\_\_

\_\_\_\_\_

## Second Household Parents

\_\_\_\_\_  
First Name                      Last name                      Relationship                      Work Phone                      Cell Phone                      Email

\_\_\_\_\_

\_\_\_\_\_

## Emergency Contacts

\_\_\_\_\_  
Name                                      Relationship                                      Phone 1                                      Phone 2

1 \_\_\_\_\_

2 \_\_\_\_\_

## Other than custodial parents, who is allowed to pick up your child from camp?

\_\_\_\_\_

*I/We grant Woodland Blast Summer Camp all authority and permissions indicated on this form by my/our selections. I/We understand that all authority and permission granted hereunder shall be valid and enforceable until specifically rescinded in writing by the person(s) signing this form.*

*Agreement: By signing this Electronic Signature Acknowledgment Form, I agree that my electronic signature is the legally binding equivalent to my handwritten signature. Whenever I execute an electronic signature, it has the same validity and meaning as my handwritten signature. I will not, at any time in the future, repudiate the meaning of my electronic signature or claim that my electronic signature is not legally binding.*

*By my signature below, I accept the conditions of this agreement.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date