



Airbound Sports  
Summer Camp 2023  
Registration Form



8 Newport Drive  
Forest Hill, Maryland 21050  
443-371-6194  
[www.airboundsports.com](http://www.airboundsports.com)

**Camper Information:** Male / Female

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Is your child a returning camper? Yes / No

Current School:

\_\_\_\_\_

**Parent/Guardian Information 1:**

Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Parent/Guardian Information 2:**

Name: \_\_\_\_\_ Relationship to Camper: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email Address: \_\_\_\_\_

**CAMP SESSIONS:**

Session 1: June 19<sup>th</sup> – June 23<sup>rd</sup>

Session 2: June 26<sup>th</sup> – June 30<sup>th</sup>

Session 3: July 3<sup>rd</sup> – July 7<sup>th</sup>

Session 4: July 10<sup>th</sup> – July 14<sup>th</sup>

Session 5: July 17<sup>th</sup> – July 21<sup>st</sup>

Session 6: July 24<sup>th</sup> – July 28<sup>th</sup>

Session 7: July 31<sup>st</sup> – August 4<sup>th</sup>

Session 8: August 7<sup>th</sup> – August 11<sup>th</sup>

Session 9: August 14<sup>th</sup> - August 18<sup>th</sup>

Session 10: August 21<sup>st</sup> - August 25<sup>th</sup>

**Cancellation Policy:**

All cancellations must be in writing two weeks prior to the beginning of the camp session. Please note that there will be a \$75.00 cancellation fee. There will be no refunds after the start of your camp session. Approximately two weeks before your child's summer camp session begins you will receive a health history form that must be completed prior to the start of camp.

\*All camp fees are due before the beginning of camp.

**Send Registration and Payment To:**

Airbound Sports Arena  
8 Newport Drive  
Forest Hill, MD 21050

Parent 1/Guardian1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent 2/Guardian 2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Check# \_\_\_\_\_ Amount \$ \_\_\_\_\_ Cash \_\_\_\_\_ Credit Card \_\_\_\_\_

**Emergency Contact:**

\*The first attempt will be to contact the campers/guardians. Emergency contacts listed below must be able to pick your child up in the event of an emergency.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Is the above person authorized to pick up the child in the event of an emergency: Yes \_\_\_ / No \_\_\_

Physician Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Additional Authorized Pick-Up:**

1. \_\_\_\_\_

(Name) (Contact#) (Relationship)

2. \_\_\_\_\_

(Name) (Contact#) (Relationship)

\*All campers must be picked up by the person(s) authorized by the registering parent/guardian.