



**CAMP TOTOKETT July 30 – August 3, 2018
ADULT STAFF REGISTRATION**

Name: _____ Gender: M F
E-mail: _____
Phone-Home: _____ Cell: _____ Work: _____
Address: _____ City: _____ State: ___ Zip: _____

Please list any Special Needs or Information:

Medication(s): _____
Allergies: _____

Emergency Contact Information:

Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____

All adult volunteers/staff members must have a current physical form on file to volunteer at camp – it is a state requirement. By agreeing to volunteer, you agree to furnish us with this form prior to the first day of camp. Even if you will only be on premises for one activity, a Physical Form and Registration Form are required. Physicals are valid for three years from the date of your last exam.

Staff Signature: _____ **Date:** _____

Mail or fax your completed Registration & Physical Forms to:

**CAMP TOTOKETT
First Congregational Church
1009 Main St. Branford, CT
06505**

**Telephone: (203) 488-7201
Email: camptotokett@gmail.com**