

**CC PARISH SUMMER SPORTS & RECREATION CAMP 2026**  
**Registration Form**

**June 29, 30, 2, 3**      **from 9 AM – 3 PM**      **\$175 for the Week**  
**July 6 – 10**      **from 9 AM – 3 PM**      **\$219 for the Week**

**1<sup>st</sup> Child's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**2<sup>nd</sup> Child's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**3<sup>rd</sup> Child's Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Parent Phone Number** \_\_\_\_\_

**Emergency Contact Number** \_\_\_\_\_

**Check off the week(s) your child(ren) will attend.**

- June 29, 30, 2, 3      \$175**
- July 6 – 10      \$219**
- June 29, 30, 2, 3 and July 6 -10      \$394**

**Multiply the amount selected by number of children attending**

**For example:      \$394 X 1 child(ren) = \$394**

**\$394 X 2 child(ren) = \$788**

**\$ \_\_\_\_\_ amount x \_\_\_\_\_ number of children attending**

**Enclosed is \$ \_\_\_\_\_ Cash or Cheque (Payable to Corpus Christi Parish)**

**Deadline for submission. Is June 5, 2026.**

**Please note this sports camp is dependent on the number of participants.**

**The proceeds of the summer camp will go towards the capital campaign.**

The camp coordinators will send more detailed information to those registering for the summer camp in early June.

I understand that reasonable precautions will be taken to safeguard the health and well-being of the participants in CC Parish Sports Camp and that I will be notified as soon as possible in the event of an emergency. I hereby release and forever discharge this Diocese, parish, the volunteer(s) from all manners of action and/or claims which I, or the child/children named above, shall or might arise for any reason, during my child's/children's attendance at the sports camp.

By signing this form, I allow my child/children to be photographed by the organizers of the sports camp.

**Parent / Guardian (Print Name)** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_