

Parent/Guardian Signature_

Y. A. T. T. A. S. 2015 Registration Form

Camper Information (please print)

			Dob
Last Name	First Name		DOB
Male Female	Grade in Fall	Shirt Size cs cm cl cxl s m l xl xxl (please circle the correct size)	
School		# of y	years at Y.A.T.T.A.S
Address			
	Street Address		City State Zip
Mother/Guardian Name _		Work Number	Cell Number
Father/Guardian Name		Work Number	Cell Number
Emergency Contact 1		Relation	Number
Emergency Contact 2		Relation	Number
Price includes: \$50.00 Registration fee, c	June 22, 2015	Y.A.T.T.A.S. Dates 5 - July 31, 2015 \$ ps (Live Theatre Productions and	775.00 nd amusement park)
Discounts: Sibling Discount - \$15 or Payment Plan Available		•	
dismissal, or failure to att	end. Returned checks an		are no refunds for early departure, Il students are required to sell 10 ticket Arts Performance Center.
Archbishop of Baltimore,	a corporation sole, and to, actions whatsoever, ari	their agents, employees and pri	Edwin F. O'Brien, Roman Catholic ncipals, of and from any and all ss, damage, or injury that may be

Date