



Meeting Street  
The Grace School

Arts and Smarts Summer Camp  
at The Grace School

**Family Information Sheet  
Summer 2019**

**Grade in September 2019:** \_\_\_\_\_

**Camper's Name:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **Sex:** M \_\_\_ F \_\_\_

**Street:** \_\_\_\_\_ **Apt./Fl.** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Parent or Guardian's  
Name:** \_\_\_\_\_

**Street:** \_\_\_\_\_ **Apt./Fl.** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone/ Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **Work:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Parent or Guardian's  
Name:** \_\_\_\_\_

**Street:** \_\_\_\_\_ **Apt./Fl.** \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Phone/ Home:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **Work:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Other's Residing in Home:**

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

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

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

**PLEASE RETURN FORM TO: Arts and Smarts Summer Camp at The Grace School, ATTN:  
Heather Boccanfuso, 1000 Eddy Street, Providence, RI 02905 or email form to:  
hboccanfuso@MeetingStreet.org.**