

Summer Camp Registration Form



Complete one registration form per child. Registrations are accepted on a rolling basis until camps are full. Payments may be combined for more than one camper.

Child Information																									
Name (first, middle, last):																									
Age: T-shirt size: Youth: S M L XL / Adult: S M L																									
<p>Ages 6-9</p> <p>Week 1: Whole week <input type="checkbox"/></p> <p>June 18: Animal Kingdom <input type="checkbox"/></p> <p>June 19: Wild Young <input type="checkbox"/></p> <p>June 20: Do You Hear <input type="checkbox"/></p> <p>June 21: Claws and Clues <input type="checkbox"/></p> <p>June 22: Jr. Rehabbers <input type="checkbox"/></p> <p>Week 2: Whole Week <input type="checkbox"/></p> <p>July 9: Wild Puzzles <input type="checkbox"/></p> <p>July 10: Bumblebee <input type="checkbox"/></p> <p>July 11: Myths <input type="checkbox"/></p> <p>July 12: Pollution <input type="checkbox"/></p> <p>July 13: Conservation <input type="checkbox"/></p> <p>Total Fee for Full Program:</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <th style="width: 20%;">Qty (1 or 2)</th> <th style="width: 30%;">Cost / week</th> <th style="width: 50%;">Total Cost</th> </tr> <tr> <td></td> <td style="text-align: center;">\$200.00</td> <td></td> </tr> </table> <p>Total Fee for Single Days:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">Quantity</th> <th style="width: 30%;">Cost / Day</th> <th style="width: 50%;">Total Cost</th> </tr> <tr> <td></td> <td style="text-align: center;">\$50.00</td> <td></td> </tr> </table>	Qty (1 or 2)	Cost / week	Total Cost		\$200.00		Quantity	Cost / Day	Total Cost		\$50.00		<p>Ages 10-14</p> <p>Week 1: Whole week <input type="checkbox"/></p> <p>June 25: Bones <input type="checkbox"/></p> <p>June 26: Flu Season <input type="checkbox"/></p> <p>June 27: Flight <input type="checkbox"/></p> <p>June 28: Buddy System <input type="checkbox"/></p> <p>June 29: Translation <input type="checkbox"/></p> <p>Week 2: Whole week <input type="checkbox"/></p> <p>July 16: Wild World <input type="checkbox"/></p> <p>July 17: Working for Wildlife <input type="checkbox"/></p> <p>July 18: 23 and You <input type="checkbox"/></p> <p>July 19: Changing World <input type="checkbox"/></p> <p>July 20: In this Together <input type="checkbox"/></p> <p>Total Fee for Full Program:</p> <table border="1" style="width:100%; border-collapse: collapse; margin-bottom: 10px;"> <tr> <th style="width: 20%;">Qty (1 or 2)</th> <th style="width: 30%;">Cost / week</th> <th style="width: 50%;">Total Cost</th> </tr> <tr> <td></td> <td style="text-align: center;">\$200.00</td> <td></td> </tr> </table> <p>Total Fee for Single Days:</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width: 20%;">Quantity</th> <th style="width: 30%;">Cost / Day</th> <th style="width: 50%;">Total Cost</th> </tr> <tr> <td></td> <td style="text-align: center;">\$50.00</td> <td></td> </tr> </table>	Qty (1 or 2)	Cost / week	Total Cost		\$200.00		Quantity	Cost / Day	Total Cost		\$50.00	
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Please include payment with registration.																									

**You may combine payments for multiple children on one form.
You can use your credit card information by calling us at 540-837-9000.**

Total Amount Due: _____

Check – Check Num: _____

Credit Card Number

Exp Date

Security Code

Signature: _____

Parent/Guardian Information

(Name) Last:

First:

(Name) Last:

First:

Street Address:

City:

State:

Phone (Primary):

Phone (Other):

Email (optional):

Drop-Off & Pick-Up Arrangements

List any persons not already listed above who will provide transportation for your child.

Name:

Relationship:

Phone:

Emergency Contact

Name:

Relationship:

Phone:

Child's Health Information

Insurance Provider Company:

Policy #:

Food or other allergies:

Are there any considerations or special needs you would like us to be aware of?

How did you hear about camp?