NATURE CAMPS, INC. 2012 REGISTRATION FORM

Child's Last Name | Child's First Name | Nickname | Gender M ❍ F ❍ | Home Phone #

Age at Time of Camp | Grade NOW | Date of Birth | Did this Child Attend NC Last Summer? Yes ❍ No ❍

Child's School (Attending NOW) | CHILD'S Email Address

Child's Address | City | State | Zip Code

Optional Group Request (One Request Only, and MUST be requested by the parents of BOTH children)

Parent/Guardian 1 Name | Address (if different from child's) | Home Phone (if different from child's)

Occupation | Work # | Cell # | Email

Parent/Guardian 2 Name | Address (if different from child's) | Home Phone (if different from child's)

Occupation | Work # | Cell # | Email

Would you consider participating in our Family Overnight and Concert (share a talent/story/song)? Yes ❍ No ❍

How did you hear of NC? Baltimore's Child ❍ Internet ❍ Camp Fair ❍ NC Family (who?)_____ Other _____

Camper Program:
(Ages 5-12)
Two-Week Sessions:
1 ❍ 2 ❍ 3 ❍ 4 ❍

Camp Wonder Program:
(Age 4)
Two-Week Sessions:
1 ❍ 2 ❍ 3 ❍ 4 ❍

Teen Adventure Program:
(13-16 years old)
Four-Week Sessions:
1 ❍ 2 ❍ 3 ❍

Camp Little Feet Program:
(Ages 2½- 4)
Four-Week Sessions, Tues.&Thurs:
1 ❍ 2 ❍

Add-a-Week Option: Please add the week of: _____

Riding Instruction:
Two-Week Sessions: 1 ❍ 2 ❍ 3 ❍ 4 ❍

Extended Day:
Two-Week Sessions: 1 ❍ 2 ❍ 3 ❍ 4 ❍

Van Service (from Greenspring Station only):
Two-Week Sessions: 1 ❍ 2 ❍ 3 ❍ 4 ❍

PAYMENT METHOD

Check/Money Order #: _____

Visa ❍ MC ❍ Am. Express ❍ Exp. Date: ____/____

Name on Card: _____

Card #: _____

Signature: _____

Charge Remaining Balance on*: ____/____(Date)

*NOTE: Unless otherwise stated, the balance will be charged on the Deadline: May 24.

PAYMENT CALCULATION

A $250 deposit MUST accompany the Registration Form.
Deposit is non-refundable unless registration is cancelled prior to May 24.
Full Payment and Health Form are due by May 24, without exception.

	Fee per Session	# of Sessions (Add-a-Week = .5)	Total
Camper / Camp Wonder Session	$740		
Camp Little Feet Session	$200		
Teen Adventure Session	$1700		
Riding Instruction	$325		
Extended Day Program	$100		
Van Service	$375		
		Grand Total	
		Amount Enclosed (Minimum Deposit of $250)	
		Amount Due	

For Office Use Only

TF	AMT	DT	NO	BD
HF				

Date Submitted: __ __ _/____/____

Registration and Health Forms MUST BE SENT IN TOGETHER.
Mail completed forms to: Nature Camps, Inc., PO Box 240, Monkton, MD 21111-0240 or Fax to 410-343-0236