



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 _____

Programs	Select Sessions	Fee per Session	# of Sessions	Total
Camp Little Feet (Toddler)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$250.00		
Camp Wonder (age 4)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$800.00		
Camper (ages 5-12)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$800.00		
Explorer (ages 11-12)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$850.00		
Teen Adventure (ages 13-16)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$900.00		
Add-a-Week	Week of _____	\$400.00		
Extended Day	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$100.00		
Van Service (specify Greenspring or Kenilworth)	1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/>	\$375.00		
Nature Camps T-Shirt Shirts must be ordered by 6/1	Youth: XS S M L XL Adult: S M L XL 2X 3X	\$10.00		
A \$250 deposit MUST accompany the Registration Form.		Grand Total		
Deposit is non-refundable unless registration is cancelled prior to May 20.		Amount Enclosed		
Full Payment and Health Forms are due by May 20, without exception.		Balance Due		

PAYMENT METHOD

Check/Money Order #: _____

Credit/Debit: Visa MC Am. Ex

Exp. Date: ____ / ____

Name on Card: _____

Card #: _____

Signature: _____

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

* Outstanding balances will be charged on May 20th or upon registration (after May 20) unless otherwise specified above.

**Health Forms are due by May 24 for early registrants. After 5/24, health forms must accompany registration.
 Mail completed forms to: Nature Camps, Inc., PO Box 418, Manheim, PA 17545 or Fax to 410-343-0236**

Office Use	TF	AMT	DT	NO	BD

Date Submitted: ____ / ____ / ____ HF Med

