

# WILD ROSE SUMMER CAMP

## Registration Form

### Camper #1

Name: \_\_\_\_\_ Session: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex M F

### Camper #2

Name: \_\_\_\_\_ Session: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Sex: \_\_\_\_\_

### Parent/Guardian

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Amount enclosed:\$ \_\_\_\_\_ e-mail \_\_\_\_\_

**Registration by mail is on a first-come, first-served basis.**

**Make check payable to:**

**Wild Rose Summer Camp**

**P.O. Box 83271**

**Fairbanks, AK 99708**

**wildrosecamp@gmail.com**