

Woodland Discovery Camps Registration Form

Student Name: _____ Parent Name(s): _____

Nickname: _____ Birthdate: _____ Age on June 1, 2023: _____

Full Address: _____

Email: _____

Best Contact Phone #: _____ Who is this? _____

Other parent or guardian Phone #: _____ Who is this? _____

Emergency Contact: (3rd person, local or distant, to help locate you in an emergency)

Phone #: _____ Who is this? _____

Does your child have any special needs or allergies? No Yes

If yes, explain: _____

Would you like to receive email notification of any additional camps added? Yes No

How did you hear about our camp? _____

Referred by: _____

Select One: 5-Day Camps \$125 All- Summer Explore \$250

Please use one form per child. Attach sibling forms together.

Please list the NAME & WEEK # of the camp(s) and circle the time (AM or PM) you are interested in attending:

Week: _____ AM OR PM _____ \$ _____

Week: _____ AM OR PM _____ \$ _____

Week: _____ AM OR PM _____ \$ _____

Week: _____ AM OR PM _____ \$ _____

Week: _____ AM OR PM _____ \$ _____

Total Enclosed \$ _____

Please make check payable to Woodland Discovery and mail with this form to:

Woodland Discovery Camps
PO Box 553
Cornelius, NC 28031

(Do NOT use Poplar Tent address)