

Way to Go Winter Wonderland 2018 Camp

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|-----------------------------------|------------------------------------|--|
| Student's Name | School | Grade |
| Home Address | | |
| City | State | Zip |
| Mother's Name | Home Phone | Cell |
| Employer | Work Phone | Email |
| Father's Name | Home Phone | Cell |
| Employer | Work Phone | Email |
| \$350 | 4-days <input type="checkbox"/> | Thur-Fri-Wed-Thur Dec. 20, 21, 26 & 27 |
| \$350 | 4-days <input type="checkbox"/> | Fri- Wed-Thur-Friday Dec. 28, Jan 2, 3 & 4 |
| \$95 | Daily Fee <input type="checkbox"/> | Which Days: |
| EMERGENCY CONTACT | | |
| Name | Phone | Relationship |
| Name | Phone | Relationship |
| Family Physician | Phone | |
| Insurance Carrier | Policy # | |
| Allergies or special needs | | |

For information contact Luckie Leiva luckie.leiva@gmail.com 408-829-2460