WYLD Education
Summer Camps

Student Information Sheet

Participant Name(s)

_____

Date of Birth / Age

_____

Parent(s) / Guardian(s) Name(s)

1. _____
2. _____
3. _____
4. _____

Allergies, Dietary Restrictions, Physical Limitations:

WYLD Education has a non-discriminatory policy toward all participants. In order to provide a safe and supportive camp experience, we would ask that you inform us of any major health concerns or limitations that might affect your child's participation at camp in any way. More detailed health information is required on our health form (to be included in enrollment packet). Please include general information here that will assist with our activity programming and meal planning. Thank you for your understanding!

_____

_____

_____

_____

Primary Contact Information (For enrollment packet and additional email communication):

Name:

Email address:

Phone Number:

Mailing Address:

Deposit information: $250 per participant due by June 1st, 2018.

Please indicate the camp you will attend below.

Big Sur Kids Camp	***Trees to Seas Teen Camp***	
Attending:	*Attending:*	*Total Deposit: $*
Name(s):	*Name(s):*	*Check Number:*

1. Please indicate how many participants will attend. If you are enrolling multiple children (siblings) please also indicate the name(s) of the child who will attend each camp.
2. **Please make checks payable to WYLD Education**
3. Send your completed form and deposit to 34092 Seville Place, Dana Point, CA 92629
4. Get ready for camp!

Acknowledgement:

Deposits are non-refundable.

I understand that my deposit is non-refundable and release WYLD Education LLC from any and all claims arising from the submission of this deposit. I understand that returned checks will incur a $30 service fee that will be assessed in addition to the initial deposit amount. All balances and additional payments must be received within 30 days of invoice date.

Signature: Date: