

CATALINA ISLAND YOUTH & FAMILY CAMPS 2010

Please complete one form for each child attending camp.

STUDENT NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CHILD'S AGE GROUP (Please circle one) KIDS CAMP (ages 8-12) TEEN CAMP (ages 13-17) AGE: _____

CHILD'S GENDER (Please circle one) MALE FEMALE

PLEASE CHOOSE SESSION

CATALINA YOUTH & FAMILY GROUP SUMMER CAMP

4 Youth & Family sessions @ \$440 kids (under 12) \$480 teens and adults

1 Christian Camp Session @ \$662 kids (under 12) \$695 teens and adults

June 13-June 18 _____

June 27-July 2 _____

July 11-July 16 _____

July 25-July 30 *(Christian Camp) _____

DAY PHONE (_____) _____

ALT PHONE (_____) _____

EMAIL ADDRESS _____

NAME OF PARENT/GUARDIAN _____

Please call for availability. Send \$150 deposit to hold your spot.

Multi-child discount \$20 off second and each add'l child.

PAYING BY (Please circle one): CHECK CREDIT CARD MONEY ORDER

Type of Credit Card : VISA or Mastercard

Card # _____ Exp _____ SIGNATURE _____

Make Checks Payable to: **Mountain And Sea Adventures** Check # _____

MAIL OR FAX PAYMENT AND
REGISTRATION FORM(S) TO:
Mountain & Sea Adventures
CATALINA SUMMER CAMP 2009
P.O. Box 950 San Pedro, CA 90733
(866) 665-8821- FAX
(310) 427-7845- PHONE