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285 Hungry Hollow Road
Chestnut Ridge, NY 10977

Primitive Living Skills Registration Form

Children - Ages 10-14

Your child's name (first & last): _____ Age: _____

Parent Name (first & last): _____

Parent Email: _____ Phone: _____

Additional Emergency Contact: _____

Phone: _____ Relation: _____

Allergies (Food, environmental, bees, etc):

Sessions:

*** When enrolling for a single session, please register by the Wednesday prior to the session date. ***

Fall/Winter AND Spring Series (all 8 sessions)

Fall/Winter Series (the following 4 sessions)

-OR select single sessions*-

November 11th, 2017

December 9th, 2017

January 13th, 2018

February 10th, 2018

Spring Series (the following 4 sessions)

-OR select single sessions*-

March 11th, 2018

April 15th, 2018

May 13th, 2018

June 10th, 2018

***Single Sessions:** Our sessions are booked on a first come, first serve basis. You may enroll in single sessions, rather than a full series, **when space permits**. Upon registration, we will confirm with you that there is space for you in the session(s) you chose, or put you on a waitlist if need be.

Payment:

\$260 Fall/Winter AND Spring Series, \$140 for either series of 4 sessions, \$45 for each single session **PAYMENT MUST BE SUBMITTED WITH THIS REGISTRATION FORM (Cash or Check – made out to The Nature Place Day Camp)**

Any additional information we should know: _____

My child has my permission to engage in all activities except as specifically noted (Use the additional information section above). In the event I cannot be reached in an emergency, I hereby give permission to the physician selected by the Program Leader, to secure and administer treatment, including hospitalization, for the person named above.

Parent/Guardian Signature: _____ Date: _____