## Application for Father/Son Camp June 16-18, 2017

Send To: Turtle Island Preserve · Attention: Father/Son Camp · 2683 Little Laurel Rd. Boone, NC 28607

\*Please do not use this application for Summer Youth Camp, Adult Camp or Family Camp

<u>Tuition</u>:\$100 p/day/p/person: age 11+ \$80 p/day/p/person: age 10-4 (3 and under - no charge) <u>Deposit</u>: \$250 p/family I understand that a nonrefundable deposit is due with this application and the remaining balance is due before May 1. I grant permission for my child to participate in all Turtle Island Camp activities. I fully understand that my child will be learning to use fire and sharp tools in order to learn certain skills. There will be hiking, swimming, interacting around horses and other farm animals, and playing in a rough wilderness environment. I fully understand that certain accidents may occur and I agree not to hold Turtle Island Preserve Camp, leaders, or staff liable in anyway whatsoever. In case of emergency, I authorize Turtle Island Preserve Camp staff to provide and or seek first aid, hospital, and professional care for my child.

Parent Signature:		Printed name:		Date:	
Father Name:					
Son Name:	first	middle	last		
Son Name:	first	middle	last		
Home Address:	first	middle	last		
This	s is the address all p	orimary correspondences	will go to, unless otherwise ind	dicated.	
Home phone:	Work phone:				
Father's Cell:		Son's Cell:			
Father's Email:	Son's Email:				
Name of Emergen	ncy Contact Perso	(Other than Father):			
Phone:	Relationship to Camper:				
Describe your and you	ur son's swimming lev	el:			
Age at arrival to camp	- Father: (Dat	e of Birth/) Do y	vou smoke: Y/N		
Age at arrival to camp	- Son: (Date o	of Birth/) Age at a	arrival to camp - Son: (Dat	te of Birth/)	
Insurance Company: _			Effective Dates	to	
Address	· · · · · · · · · · · · · · · · · · ·	City	State	Zip	
Contact #	Polic	/ #	Group #		
1.) Why do you want to come to Turtle Island Preserve and what do you hope to get out of your experience?					
2.) What activities, primitive skills, and crafts are you most excited about participating in and learning about?					
3.) If you and your child are first time campers, how did you learn about Turtle Island Preserve?					
4.) Do you or your child have any dietary restrictions/food allergies, medical conditions, pre-existing allergies, or currently taking <a href="mailto:any">any</a> medications ? (If so, please list in detail)					
5.) Does your child have any challenging behaviors we should be aware of?					

Use reverse side of page if you need to elaborate on any details, concerns or needs that are not covered above →