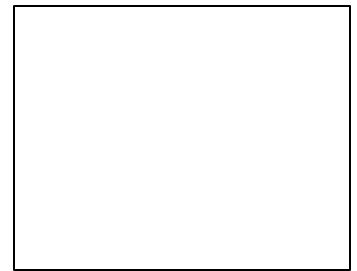


Thunderbird Ranch

Summer Camp

9455 Hwy. 128 ~ Healdsburg, CA 95448
Phone: 707 433-3729 ~ Fax: 707 433-2960
E-mail: alexvalley@aol.com



Current Photo

SUMMER DAY CAMP – APPLICATION FOR ADMISSION

Name of Camper _____ Date of Birth ___/___/___ Age at Camp _____ Sex _____

Address _____ City _____ State _____ Zip _____

Phone _____ School Camper Attends _____ Grade Next Year _____

Mother's Name _____ Maiden Name _____

Father's Name _____

Camp Session(s) Desired: Session # _____

Camps previously attended _____

Email Address: _____ How did you hear about Thunderbird Ranch? _____

Contact	First Name	Last Name	Work Phone (with area code)	Cell Phone/Pager (with area code)
Parent/Guardian *				
Parent/Guardian *				
Emergency Contact				
Step-Parent/Other *				

* Applicant lives with: ___ both natural parents ___ single parent ___ father/step-mother ___ mother/step-father ___ grandparents ___ other
If parents are divorced, who has legal custody? _____ Who should be contacted during camp? _____

I am enclosing a \$150.00 registration fee per session per child for day camp as required to hold a reservation. It is my understanding that if cancellation becomes necessary, the application fee will be refunded, less a service charge of \$50.00 ONLY when written notice of cancellation is received before May 1. After that date, NO REFUND of the deposit is made for cancellation. The health certificate signed by your doctor and the balance of tuition is due May 15th. From May 15 prior to arrival at camp the camper may not receive a refund for the balance of tuition for any reason should he or she decide not to attend camp or leave camp early. The space has been allocated and cannot be resold. Whether the reason for not attending or leaving camp early is due to health or homesickness problems; dismissal or withdrawal for any reason prompted by the camp or by a parent; a refund cannot be granted.

The undersigned agrees that the Directors of Thunderbird Ranch Summer Camp shall not be responsible for injuries to or illness of: _____ during the time said applicant is enrolled at the Thunderbird Ranch Summer Camp in the absence of actual negligence on the part of the Directors of the Thunderbird Ranch Summer Camp.

In case of accident, I authorize the securing of medical treatment for _____. The undersigned consents to the use of any pictures of this child to be used in any camping pursuit. My child has my permission to participate in any out of camp excursion.

Date _____ (Signature of Parent or Guardian) _____