

CATALINA ISLAND SUMMER CAMP 2010

Please complete one form for each child attending camp.

CAMPER NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

CAMPER'S AGE GROUP : TEEN & ADULT ONLY (ages 13-17 & 18 and up) AGE: _____

CAMPER'S GENDER (Please circle one) MALE FEMALE

PLEASE CHOOSE SESSION

CATALINA ISLAND EXTREME SPORTS CAMP: TEEN & ADULT CAMP

1 Session @\$695 _____

-September 17-19 (Fri-Sun) _____

DAY PHONE (_____) _____

ALT PHONE (_____) _____

EMAIL ADDRESS _____

NAME OF PARENT/GUARDIAN _____

Please call for availability. Send \$150 deposit to hold your spot.
Multi-camper discount \$20 off second and each add'l camper.

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
P.O. Box 950 San Pedro, CA 90733
(866) 665-8821- FAX
(310) 427-7845- PHONE

