



NRA Whittington Adventure Camp
Registration. Summer.....2010

Applications are accepted on a first come, first served basis

Please enter the date this application was completed: _____

Attending (Please Circle): **Session I June 13 - June 25** / **Session II June 27 - July 9**

CAMPER INFORMATION

PLEASE PRINT CLEARLY

Full Name: _____ Birth Date: _____ Age at Camp: _____

(Must be 13 at Camp)

Nick Name: _____

Address: _____ Social Security #: _____

City: _____ State: _____ Zip: _____ Male: _____ Female: _____

Home Phone: _____ Parent's Business Phone: _____ Ext: _____

EDUCATIONAL INFORMATION

Name and Address of School: _____

Extra Curricular Activities: (sports, leadership, debate team, musical instruments)

SPECIAL REQUIREMENTS: (i.e. medical, disabilities, etc.) _____

PARENT / GUARDIAN INFORMATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

BILLING ADDRESS: (If other than Parents)

Guarantor: _____ Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

