email: info@wildliferescuett.org www.wildliferescuett.org phone: 673-5753 cell: 366-4369



## **Wildlife Camp Application**

Please complete all fields below. This form can be completed digitally using a PDF reader (Adobe Acrobat or similar).

Child's Name:		Camp date:		
Age:	Date of Birth:	Sex:	male	female
Parent Name:		Phone/Cell:		
Address:		E-mail:		
Emergency contact:				
Relationship to child:		Phone/Cell:		
Does your child suffer from	any allergies, illness, disability or any othe	er medical conditions?	lf yes, pleas	e state.
Does your child currently to	ake any medications for any condition list	red above? If yes, plea	se state.	
Child's hobbies, interests a	and talents:			
	osts a total of \$420 for the 3 days. e warriors' camp t-shirt and activity book.	t-shirt size:		
There are 30 places availa	ble in each camp. first-come-first-served basis.	application date:		
Please e-mail this form to i		арріісаноп аате.		

Upon successful application we will contact you with payment details for bank transfer to the ECWC account.\*

<sup>\*</sup> Please note places are not reserved until full payment is made and cancellations less than 2 weeks prior to the camp can't be refunded.