

Escondido Humane Society Critter Camp Application 2008

Child's Name: (last, first)-----

Mailing Address-----

City-----State-----Zip-----

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Home Phone (----)-----

Birth date-----Age-----

Parent/Guardian Names-----

Day/Work Phone-----

Email Address-----

Alt. Phone (-----)-----

Emergency Contact Name-----

Emergency Contact Phone-----

Name and Phone # adults authorized to pick up child-----

Please fill out application and remit with payment of \$65.00 to:

EHS

c/o Critter Connection Camp

3450 East Valley Parkway

Escondido, Ca. 92027

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