



Registration Form

Child's First Name: _____ Last Name: _____
 Child's Birthdate: _____ Age: _____ Gender: _____
 Parent's Name (s): _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Home Phone: _____ Cell Phone: _____
 Work Phone: _____ Alt. Phone: _____
 Email Address: _____

Additional Children's Names:	Birthdate	Age / Gender
_____	_____	_____
_____	_____	_____

Program Name	Cost	Discount	Participant's Name
Teen Rites of Passage (2/13-17/09)	\$1697	_____	_____
Warrior Camp (dates: TBA)	\$ 895	_____	_____
Superhero Camp (dates: TBA)	\$1397	_____	_____
Teen Life Mastery (dates: TBA)	\$1697	_____	_____

Total Amount Paid:

Total Amount Owed:

Balance Due:

Paid by: _____ Cash _____ Check _____ Visa _____ Master Card _____ Discover _____ AmExp
 Credit Card Number: _____ Exp. Date: _____ 3 digit code: _____
 Full Name on Credit Card: _____

May we have permission to use photos and footage taken at camp for marketing purposes? Y / N
 Where did you hear about us? _____
 Referred by: _____

**Payment is due in full upon registration unless special arrangements have been made.
 Please make checks payable to Fire Mountain.
 Registration can be mailed or faxed to our office.**

THANK YOU!