



Outdoor Adventure Summer Day Camp 2023 Registration Form

Choose your session (check all that apply)

- Session 1: June 5-9, 8:30-11:30 AM 3-4 year olds
- Session 2: June 12-16, 8:30-11:30 AM 4-5 year olds
- Session 3: June 26-30, 8:30-11:30 AM 6-10 year olds
- Session 4: July 5-7, 8:30 AM -3:30 PM 5-12 year olds
- Session 5: July 10-14, 8:30 AM-3:30 PM 5-12 year olds
- Session 6: July 17-21, 8:30 AM-3:30 PM 5-12 year olds
- Session 7: July 24-28, 8:30 AM-3:30 PM 5-12 year olds
- Session 8: July 31-August 4, 8:30 AM-11:30 AM 4-6 year olds
- Session 9: August 7-11, 8:30 AM-11:30 AM 3-4 year olds

Camper's Name _____ Age _____
(at time of camp)

Name of Parent(s)/Guardian(s): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone (h): _____ Phone (w): _____ Phone (c): _____

Email address(s): _____

If not available in an emergency contact:

First emergency contact name _____ Phone _____

Second emergency contact name _____ Phone _____

Is this a returning or first-time camper? ___ Returning ___ First-time

Is another family member also attending camp? ___ Yes ___ No If yes, who? _____

Note -- Camp Teams/Groups will be divided by age group; youngest, middle, and oldest (as we had done pre-covid summers)

Please list name(s) of registered campers your camper wants to be with: _____

How did you hear about Dahlem's Outdoor Adventure Day Camp? (check all that apply)

- Returning Camper
- Social Media (Facebook, Instagram, etc.)
- Advertisement/Flyer
- Dahlem's Website
- EBlast Newsletter
- Other: _____
- Referred by (please write person's name in space) _____

Registration Fee per Session:

Half Day Camp 8:30-11:30 AM	<input type="checkbox"/> \$125/Dahlem member	<input type="checkbox"/> \$150/non-member
All Day Camp 8:30 AM-3:30 PM	<input type="checkbox"/> \$175/Dahlem member	<input type="checkbox"/> \$200/non-member
3-Day Camp 8:30-3:30 PM (Session 4)	<input type="checkbox"/> \$105/Dahlem member	<input type="checkbox"/> \$120/non-member

Amount Enclosed: \$ _____ If paying by credit/debit card (Visa/Master Card) call Dahlem at 517-782-3453 ext. 0 or stop in at the office during business hours (Tues.-Fri. 9 AM-4 PM)

Circle T-Shirt Size (shirt included with registration): **Youth** XSm. Sm. Med. Lg. **Adult** Sm. Med. Lg. XL

Refund Policy: Refunds (less a \$35 administration fee per session cancellation) will only be provided if cancellations are received one week (7 days) minimum prior to the beginning of the selected week of camp.

Photograph Release: I grant The Dahlem Conservancy permission to display photo(s) or video(s) of my child _____ on posters, brochures, displays, and any other audio-visual media representing The Dahlem Conservancy and/or its programs. Displays may be in-house, at community events, broadcasts, in newspapers, or any other audio, visual media.

Parent/Guardian signature: _____ Date: _____

Dahlem Conservancy, 7117 S. Jackson Rd., Jackson, MI 49201
Phone 517-782-3453 Fax 517-782-3441 dahlemcenter.org