

Peninsula Humane Society & SPCA's



ANIMAL CAMP

Session 1: June 23-27

Session 2: July 7-11

Session 3: July 28-August 1

Session 4: August 11-15

Because we want each child's experience in our program to be personal and rewarding, enrollment is limited. You will be notified regarding session availability. PLEASE DO NOT SEND A CHECK AT THIS TIME. If there is space remaining for your child, a registration fee of \$180.00 will be due upon acceptance.

Child's Name: _____ **Nickname?** (for nametag) _____

Child's Birth Date: _____ **Current Age:** _____ (must be 9-12 years old at start of camp)

Parent/Guardian Name(s): _____

Street: _____ **City:** _____ **Zip:** _____

Home Phone: _____ **Work/Cell Phones:** _____

Email address (if you'd like photos from camp): _____

1) Which session would your child like to attend? _____ **Second choice?** _____

2) Has your child applied for *Animal Camp* before? No ____ Yes ____

3) Since each day of our program builds upon the previous day, we feel it is important for your child to be present for all five days of the session. Do you have any prior commitments during this time frame that would cause your child to be absent?

No ____ Yes ____ If yes, which day? _____

4) Does your child have any allergies or conditions that would prohibit him/her from handling animals?

No ____ Yes ____ If yes, please explain: _____

5) Why is your child interested in attending *Animal Camp*? _____

6) Topics of particular interest to your child: _____

7) Are there any pets residing with your family? If so, what kind? _____

8) How/Where did you hear about *Animal Camp*? _____

9) Any applicants your child hopes to attend with? _____

Complete and return to:

PHS/SPCA Education Dept., 12 Airport Blvd., San Mateo, CA 94401-1006

Questions? Call (650)340-7022 x369