

**GREAT VALLEY NATURE CENTER
CAMP REGISTRATION
PO BOX 82
DEVAULT, PA 19432
(610) 935-9777**

Please fill out both sides of this form and return it to the above address with your payment. This sheet must be entirely filled out and accompanied with the payment for processing to be completed.

How did you hear about GVNC Camps? _____

CHILD'S NAME _____ (A) AGE _____

My child would like to be in the same session as his/her friend: _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

SUBTOTAL _____

CHILD'S NAME _____ (B) AGE _____

My child would like to be in the same session as his/her friend: _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

CAMP NAME _____ DATES _____ COST _____

SUBTOTAL _____

SUBTOTAL OF ALL CAMPS (including subtotals of other pages) _____

**Family Membership at
Great Valley Nature Center: \$50**

Name _____

Address _____

City _____ **State** _____ **Zip** _____

Phone _____

E-Mail _____

MULTIPLE CAMP DISCOUNT _____
(See Registration Information)

MEMBERSHIP TOTAL _____

T-SHIRT SUBTOTAL _____
(April 15 deadline)

TOTAL ENCLOSED _____