

Point Lobos



Summer Adventures

SUMMER ADVENTURES

Point Lobos State Natural Reserve

Carmel, CA 93923



Website <http://PointLobos.org>

Telephone 831-624-3494 (messages & information)

Student's name _____

Address _____

Date of Birth _____ T-Shirt size _____

Telephone _____

Email _____

Session 1 June 14 thru June 25

Session 2 July 5 thru July 16

Both Sessions

**Tuition
\$250
Per session**

TUITION ENCLOSED _____

Make checks payable to California State Parks - Summer Adventures

I certify that my child is physically fit to participate in the Summer Adventures Program.

I **DO NOT** want my name, address, and telephone number published to assist parents in forming carpools.

Emergency Contacts and Information

Mother's name _____

Mother's occupation _____

Phone # 1 _____ Phone #2 _____

Father's name _____

Father's occupation _____

Phone # 1 _____ Phone #2 _____

Parent availability to drive/assist with field trips _____

If we can not be reached in an emergency, please contact:

Name _____ Phone # _____

Name _____ Phone # _____

Physician or HMO _____

List any restrictions or medical treatment:

Special medications, Pertinent Information , or Special Instructions:

Allergies to food or drugs:
