



DRA School for Field Naturalists Camp Mummichog 2015 Registration Form



Parent(s)/Guardian(s) First and Last Name(s): _____

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

Tel: _____ Email(s): _____

CAMP	CAMPER'S FIRST AND LAST NAME	AGE (DURING CAMP)	BIRTHDAY	COST	AMOUNT DUE
Sea Squirts June 22 – 26; 9:00 - 1:00; <i>Ages: 5 - 8</i>				\$125 (\$110 Members)	
Earth Art June 29 – July 3; 9:00 - 3:00; <i>Ages: 5 - 8</i>				\$220 (\$195 Members)	
Prehistoric Life: Dig This! July 6 – 10; 9:00 - 3:00; <i>Ages: 6 - 9</i>				\$220 (\$195 Members)	
Marine Adventures July 13 – 17; 9:00 - 4:00; <i>Ages: 9- 12</i>				\$220 (\$195 Members)	
Firekeepers July 20 – 24; 9:00 - 4:00; <i>Ages: 9 -12</i>				\$220 (\$195 Members)	
Music and Nature (two weeks) July 27 – August 7; 9:00 - 4:00; <i>Ages 9 - 12</i>				\$440 (\$390 Members)	
Bird Beaks and Webbed Feet July 27 – 31; 9:00 - 3:00; <i>Ages: 6 - 9</i>				\$220 (\$195 Members)	
Wild About Wetlands August 3 – 7; 9:00 - 3:00; <i>Ages: 6 - 9</i>				\$220 (\$195 Members)	
Teen Institute August 10 – 14; 9:00 - 4:00; <i>Ages 13 - 17</i>				\$220 (\$195 Members)	
Mummichog Girls August 10 – 14; 9:00 - 4:00; <i>Ages: 7 - 11</i>				\$220 (\$195 Members)	
Insect-mania August 17 – 21; 9:00 - 3:00; <i>Ages: 6- 9</i>				\$220 (\$195 Members)	
NEW – Required with this registration form: <input type="checkbox"/> PAYMENT, <input type="checkbox"/> HEALTH FORM with <input type="checkbox"/> IMMUNIZATION RECORD AND <input type="checkbox"/> COPY OF INSURANCE CARD				TOTAL DUE	

Cancellation Policy: *If cancelled three weeks prior to the start of Camp Session 80% of entire amount will be refunded.*
 If cancelled within three weeks of start of Camp Session 60% of entire amount will be refunded.
 If cancelled within seven days of start of Camp Session there is no refund.

Complete Registration and Participant Health forms and return to: **DRA • PO Box 333 • Damariscotta • ME • 04543**

dra@damariscottariver.org • 207-563-1393 • www.DamariscottaRiver.org

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OFFICE USE ONLY

CAMP \$ _____

MEMBERSHIP \$ _____

I/We would like to support the Damariscotta River Association at the following membership level:

<input type="checkbox"/> \$40 Mussel/Family* <input type="checkbox"/> \$50 Oyster	<input type="checkbox"/> \$100 Alewife <input type="checkbox"/> \$250 Heron	 River Council <input type="checkbox"/> \$500 River Guardian <input type="checkbox"/> \$1,000 River Steward <input type="checkbox"/> \$5,000 River Keeper
<input type="checkbox"/> \$100 Business Member		

Did you know the DRA has:

- 2,900 Acres of conserved land
- 30 Miles of trails with public access
- 23 Miles of shoreline conserved
- 3 Islands with public access

***DRA Membership at \$40 and above qualify for Membership discounts to Camp**

Enclosed is my **separate** check for **DRA Membership** made payable to “DRA,” Memo: **Membership**

Please charge \$_____ for **DRA Membership** to my Visa MC Discover

Name: _____

 Enclosed is my **separate** check for **CAMP** made payable to “DRA,” Memo: **Camp**

Please charge \$_____ for **CAMP** payment to my: Visa MC Discover

CREDIT CARD FORM

Name: _____

Billing Address: _____

Town: _____ State: _____ Zip Code: _____ Telephone: (____) _____ - _____

Circle one: VISA MC DISCOVER (no others accepted)

Account Number: _____

Expiration Date: Month: _____ Year: _____ 3-Digit Security Code (back of card): _____

Total amount charged (**Camp** plus **Membership**): \$_____ Signature: _____

