

Registration Form for SMR Family Campout 2014

WHEN:

2:00 p.m., Sat. Sept. 13 to
11:00 a.m., Sunday, Sept. 14
Rain Date: Saturday, Sept. 20
to Sunday, Sept. 21



WHERE:

Summit Field
South Mountain Reservation
Essex County, New Jersey

FAMILY NAME:		Amount Paid:	
Registration Directions: 1.) Click on <i>Donate</i> on www.somocon.org homepage, then click on Donate button. 2.) When submitting PayPal payment, under <i>Purpose</i> indicate either: 2014 SMC membership and Family Campout Fee (\$50) , or 2014 Family Campout Fee (\$25) , if already a member for 2014. 3.) Mail the completed form to the P.O. Box below, or attach the form and e-mail it to familycampout@somocon.org . Subject line should be SMR Family Campout Registration for [FAMILY NAME] PLEASE NOTE: To minimize administration and cancellations, there are no refunds. No dogs will be allowed. Attendance is limited: Only the first 35 families registered will be able to attend. (For this event, a family is defined as one or two adults, 21 yrs. or older, with a maximum of 4 children. <i>Adults who complete the registration form must remain with children for the duration of the event.</i> QUESTIONS: Contact Jen Tally at familycampout@somocon.org , or leave a message at 844-SOM-OCAN, ext. 7.			
PayPal Confirmation No.:		Date Paid:	
No. of Tents (max. 2):	Using picnic area's charcoal grill (number limited)?	Bringing your own camp stove?	

Responsible Adult 1

Must remain with children for entirety of program.		Age:	Gender (M/F):
Last Name:	First Name:		
Mobile Tel.:	E-Mail:		
Street Address:	Town:		
Emergency Contact			
Name:	Relationship:		
Mobile Tel.:	Backup Tel.:		

Adult 2 (Optional)

Last Name:	First Name:		
Mobile Tel.:	E-Mail:		
Street Address:	Town:		
Emergency Contact			
Name:	Relationship:		
Mobile Tel.:	Backup Tel.:		

Children

Last Name:	First Name:	Age:	Gender (M/F):
Last Name:	First Name:	Age:	Gender (M/F):
Last Name:	First Name:	Age:	Gender (M/F):
Last Name:	First Name:	Age:	Gender (M/F):

