 **Summer 2012 Yoga Camp by Michelle Newman Registration Form**

Grow Wise Yoga Adventure Camps are one - week day camps for children. All camps are directed by Michelle Newman, Certified Yoga Instructor. The activities for Grow Wise Yoga Adventure Camps are chosen for their enriching qualities and alignment with the goal of offering children a fun, educational, and creative summer experience.

Pricing includes: daily yoga class, daily craft projects, daily yoga games and relaxation techniques, daily outdoor and water play, daily snack, take home yoga journals, take home camp t- shirt, and a keepsake CD of pictures that capture all of our yoga memories together.  NOTE: Campers should bring their own vegetarian or dairy free lunch each day along with their own water bottles.

Campers Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age of Camper:\_\_\_\_\_\_\_\_

Parents/Guardians Information:

 Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Name and Phone #:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation to Camper:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please pick which Yoga Camp:

 \_\_\_\_\_ JUNE 25- 29, 9:00am - 1:00pm (ages 4-7)

 \_\_\_\_\_ JULY 9 –13, 9:00am-1:00pm (ages 7-11)

$160.00 per child per week of camp. Payment by check or credit card at time of registration. Make checks out to “JCAL” and mail to Summer Yoga Camp, 2120 Oregon Pike, Lancaster, PA, 17601.

Credit Card information- we take all forms of credit cards

Credit Card Type (circle one): Visa MC Discover Amex

Card Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Card Expiration Date:\_\_\_\_\_\_\_\_\_

Signature of Cardholder:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_