

## SPRING CAMP 2020 REGISTRATION FORM May 28 – May 31, 2020 Extended Camp May 27th

Dietary Restrictions: \_\_\_\_ Vegetarian \_\_\_\_ Vegan \_\_\_ Gluten Free

Name(s):	Age(s):	Gender: Male 🖵 Female 🖵
Occupation(s):		
Mailing Address:	City:	State:Zip:
Home Phone:	Cell Phone:	Work Phone:
Email will be our primary communi	cation method for sending camp ir	ıformation.
E-mail Address:		
Emergency Contact & Phone:		Relationship:
Your Veterinarian's Name:		Veterinarian Office Phone:
Do you ever work/volunteer with do	ogs? 🗖 Yes 📮 No — If yes: How	or with who?
First Time Campers: How did you fi	ind out about Camp Dogwood?_	
		n?
If you answered "the internet"fro	m where? (please be as specific as	possible)
THE CAMP DOGWOOD REFERRAL PROC camp with our Referral Program. Get re	GRAM We like to show our appreciatio warded with a \$25 credit for each t	on to camp alumni and businesses that spread the word about new camper you refer to a full weekend program. We track town about Camp Dogwood & reap the benefits!
How many dogs are you planning of	on bringing to camp?	
Dog #1 Name:	Age:	Breed:
Dog #1 ☐ Male ☐ Female ☐ Fixed o	or 🖵 Intact	
Dog #2 Name:	Age:	Breed:
Dog #2 • Male • Female • Fixed	or 🖵 Intact	
Where did you get your dog(s), and	at what age(s)?:	
For Double & Group Accommodation	ons, please list your roommate(s)	below:
For Obedience: Please check ALL th	at apply to your dog's personality	у:
☐ I trained my dog by myself ☐	I took my dog to obedience classe	es

CABINS (include electricity and beds. Bathrooms are very close-by)	ı	Please check ALL		
□ Single Occupancy	\$690/person	that apply to your		
Double Occupancy		dog's personality:		
□ Double Occupancy for 2 members of same household with only 1 do	-	☐ Friendly		
☐ Group Occupancy (this is 3 or more Call to discuss options and rate Check here ☐ to arrive on Wednesday, for EXTENDED CAMP		<ul><li>Separation Anxiety</li><li>Submissive</li></ul>		
CHECK Here a to arrive on Wednesday, for Extended CAIVIP	add \$103/person	Runs Away		
LODGES (include private bathrooms, climate control and hotel-style acco	ommodations.)	☐ Playful		
☐ Single Occupancy	•	☐ Territorial		
Double Occupancy		☐ Dominant		
Double Occupancy for 2 members of same household with only 1 do	-	☐ Nervous		
☐ Group Occupancy (this is 3 or more—Call to discuss options and rate Check here ☐ to arrive on Wednesday, for EXTENDED CAMP		☐ Energetic		
Check here a to arrive on wearesday, for Extended Chini	add \$105/pc13011	☐ Fearful		
ADDITIONAL FULL-PROGRAM OPTIONS (Including EXTENDED CAMP*	**)	☐ Needs "space"		
☐ On-Site Tent Camping (you provide tent and all equipment)	· · · · · · · · · · · · · · · · · · ·	☐ Laid Back		
Off-Site Lodging (make your own off-site sleeping arrangements)		☐ Well-mannered		
Check here ☐ to arrive on Wednesday, for EXTENDED CAMP	add \$165/person			
DAYPASS OPTIONS		My dog is Possessive of:		
□ Single Day of Camp: FRIDAY only	\$180 /person	☐ Toys		
□ Single Day of Camp: SATURDAY only		☐ Food		
☐ Two Days of Camp: BOTH DAYS: 1 person with either 1 or 2 dogs	•	□ Me □		
☐ Single Day of Camp: ONE DAY (circle: FRI or SAT): 2 people with 1 d	log\$300/2 people	<u> </u>		
☐ Successfully co-mingles at doggie daycare ☐ My o				
**TO SUBMIT THIS APPLICATION FOR THE CAMP DOGWOOD FALL SESSION, PLEASE COMPLETE THIS FORM*  **Return with your payment of a \$200 deposit* (per person, per camp) or full payment. Your \$200 deposit holds a guaranteed reservation (based on availability). Any balance must be paid-in-full at least 90 days before this session. * Sign your name in the box below indicating you understand our "Rules & Policies" (can be found online). *Note: Deposits are NOT REFUNDABLE & NON-TRANSFERABLE. All rates and fees are subject to our "Cancellation & Payment" terms found within Camp Dogwood's "Rules & Policies". Any issues or questions about payment policies should be addressed prior to registering. Registration forms without a deposit will not be processed or held.  **RETURN COMPLETED WITH PAYMENT TO:**  **Camp Dogwood: Registration, 205 Barberry Road, Highland Park, IL 60035 or FAX both sides to: (312) 268-6170				
To make your deposit or payment by Mastercard or Visa, complete the	following information. Print I	egibly:		
I would like to charge \$to the card listed below as a: □ F	_			
Credit Card Number:				
me as it appears on card:Cardholder Signature:				
oes this card have the same billing address you listed on registration?   Ves   No (if no, please provide)				
Does this card have the same billing address you listed on registration?	res uno (15 no, piease provide	()		
☐ I have read, understand, and will adhere to the Rules & Policies, as well Dogwood brochure and online at www.Campdogwood.com and - I also INDIVIDUAL HUMAN and except where noted ("couple rates") the fee a	understand that most rates a	re provided PER room.		
Signature(s)Date		MasterCard VSA AMERICAN DISCOVER		

Signature(s)\_\_\_\_\_\_Date\_\_\_\_