

RETURN TO:
GO WILD OUTDOORS, NP
1501 Bexar Crossing
San Antonio, TX 78232
(WK) 210-393-6565 / (FX) 210-408-1900
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GO WILD OUTDOORS, NP

www.OutdoorTexasCamps.com



2026

Camper Information

Camper's Name: _____ / /
Last First Age at Camp Birth Date

Parent's Names: _____

Camper/Parent Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Mom's Cell #: () Dad's Cell #: () Work Ph: ()

Parent's e-Mail(s): _____ //

Camp Selection

****1 - WEEK CAMP SESSIONS...Please mark (X) in the box next to the Camp(s) you wish for your Camper to Attend****

	1 WEEK CAMP SESSIONS	CAMPERS	DATES		COST
	Girls Hunting, Fishing & Outdoor Skills Camp	Girls 9 – 17	June 7 th – 13 th		\$1,350
	Boys Hunting, Fishing & Outdoor Skills Camp (Session I)	Boys 9 – 17	June 14 th – 20 th		\$1,750
	Boys Hunting, Fishing & Outdoor Skills Camp (Session II)	Boys 9 – 17	June 21 st – June 27 th		\$1,750
<input type="checkbox"/>	~~~~~STAFF BREAK...NO CAMP~~~~~	~~~~~	June 28 th – July 4 th		~~~~~
	Boys Bass Fishing & Fly Fishing Camp (Session I)	Boys 9 – 17	July 5 th – 11 th		\$1,750
	Boys Bass Fishing & Fly Fishing Camp (Session II)	Boys 9 – 17	July 12 th – 18 th		\$1,750
	Boys Saltwater Fishing Camp (Session I)	Boys 13 – 17	July 19 th – 25 th		\$2,200
	Boys Saltwater Fishing Camp (Session II)	Boys 13 – 17	July 26 th – Aug 1 st		\$2,200

Camp Tuition Deposits / Payments

****Deposit Required ... \$500 Per Camp Week****

**** Balance Due 60 Days Prior to Camp Start Date****

Amount Paid Today: \$ _____.

Balance Due: \$ _____.

Date: ____ / ____ / ____ Approval Code: _____.

Date: ____ / ____ / ____ Approval Code: _____.

----- For OTC Use Only -----

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***By my Signature below, I Authorize GO WILD OUTDOORS, NP to use the Credit Card information below to process the*
*Camp Tuition Deposit and/or Balance. Balance processed approximately 60 days Prior to the Camp Start Date listed above***

I understand that by Registering my Camper to attend, that I am obligated for the entire amount of the Camp Tuition

Method of Payment: Check () Credit Card () ***A 3% Processing Fee will be charged on ALL CC's.**

CC Number: _____ - _____ - _____.

Exp. Date: ____ / ____ CVC Code: _____.

Signature: _____.