

RETURN TO:
GO WILD OUTDOORS, NP
1501 Bexar Crossing
San Antonio, TX 78232
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GO WILD OUTDOORS, NP

www.OutdoorTexasCamps.com



2027

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 (Session I)	Girls 9 - 17	June 6 th - 12 th	\$1,400
Girls Hunting, Fishing & Outdoor Skills Camp (Session II)	Girls 9 - 17	June 13 th - 19 th	\$1,400
Boys Hunting, Fishing & Outdoor Skills Camp (Session I)	Boys 9 - 17	June 20 th - 26 th	\$1,800
Boys Hunting, Fishing & Outdoor Skills Camp (Session II)	Boys 9 - 17	June 27 th - July 3 rd	\$1,800
~~~~~STAFF BREAK...NO CAMP~~~~~	~~~~~	July 4 th - July 10 th	~~~~~
Boys Bass Fishing & Fly Fishing Camp (Session I)	Boys 9 - 17	July 11 th - 17 th	\$1,800
Boys Bass Fishing & Fly Fishing Camp (Session II)	Boys 9 - 17	July 18 th - 24 th	\$1,800
Boys Saltwater Fishing Camp (Session I)	Boys 13 - 17	July 25 th - 31 st	\$2,300
Boys Saltwater Fishing Camp (Session II)	Boys 13 - 17	Aug 1 st - 7 th	\$2,300

## 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: _____.