Arboretum Nature Adventure Camp Registration

Who: Nature-loving students entering grades 4, 5 or 6 When: Tuesday, **June 16**th and Wednesday, **June 17**th Where: Interpretive Center, Linnaeus Arboretum, GAC

Drop off: 8:00 am Pick up: 5:00 pm

Cost of Camp: \$50 per student

Send Registrations To:

Linnaeus Arboretum Gustavus Adolphus College 800 W. College Ave. St. Peter, MN 56082

Please return this **form**, your **essay***, and **a fee of \$50** per student to the address above by **Wednesday**, **June 3rd**. You will be quickly notified whether or not your student is accepted. Checks can be made payable to **GAC**-- any student not accepted will receive a full refund.

Questions? call or email Scott Moeller at 507-933-6182, smoeller@gustavus.edu

Student:	
Grade level for the 2015-2016 school year:	Date of Birth:
Medical Information including allergies:	
Parent/Guardian Name(s):	
Address:	
Daytime phone: (Al	ternative phone: _(
Email (required as a primary mode of contact):	
Emergency Contact Name and Phone (Other than pare	ent or guardian listed above):
* ESSAY: On a separate sheet, student must writ want to attend, without using the word "fun." (ser	te a 5-sentence essay in their own words, explaining why they riously)
I am the parent/legal guardian of, and give permission for,	
Parent/Guardian Signature	 Date