

**FREESTYLE & FREERIDE  
TRAMPOLINE CAMP  
June 15<sup>th</sup> -moved from June 6th**

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

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

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

Home Phone: \_\_\_\_\_ Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Mother's name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Father's name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Camp cost: \$25

Attending: June 15th 3:00 – 5:00pm

*Check:* Make payable to Winter Park Resort.

*Credit Card:*

Number: \_\_\_\_\_ Exp date: \_\_\_\_\_

Amount \$ \_\_\_\_\_

Authorized signature: \_\_\_\_\_

**Please send with payment by June 8th:**

*Winter Park Competition Center*

*P.O. Box 36*

*Winter Park, CO 80482*

Fax 303-316-1690 or 970-726-1690