

glaze dayz

2010 camper registration form

today's date: _____

camper's name: _____ age: _____

gender: m / f email: _____

parent's name: _____ cell #: (____) _____

home #: (____) _____ address: _____

city: _____ zip: _____

please note camper's allergies and/or medical conditions: _____

CLASS CODE	CLASS NAME	DATE	TIME	FEE	✓PAID

TOTAL: \$ _____

signing up with a friend? _____ (name) read cancellation policy? yes no

cash check glaze gift certificate # _____ OMC/Visa # _____

amount paid: \$ _____ expiration: ____/____/____ v-code: _____

glaze employee who took registration: _____

customer signature: _____

signing up for additional classes at a later date? record them here!

CLASS CODE	CLASS NAME	DATE	TIME	FEE	✓PAID