

**KID'S CAVE KAMP 2010  
REGISTRATION FORM**

**Print this Form and Mail with check or money order  
to:**

Lincoln Caverns, Inc.

7703 William Penn Highway, Huntingdon, PA 16652

**Or Charge Registration To Your Visa, MC, Discover  
and FAX: 814-643-1358  
or PHONE: 814-643-0268**

Please fill out a separate registration form for each Cave Kamper.

# KID'S CAVE KAMP 2010 REGISTRATION FORM

PARTICIPANT'S NAME: \_\_\_\_\_

Grade Entering as of Aug. 2010: \_\_\_\_\_ Age as of June 2010: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

HOME PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

PARENT/GUARDIAN DAYTIME PHONE: \_\_\_\_\_

I am registering for:

\_\_\_\_\_ ENTERING GRADES 3, 4, 5, 6: Monday thru Thursday, June 21 - 24, 2010 (AM)

\_\_\_\_\_ ENTERING GRADES 6, 7, 8, 9: Wednesday thru Saturday, June 16-19, 2010 (PM)  
*Friday Caving Session - all day (9AM-4PM)*

\_\_\_\_\_ ENTERING GRADES 1, 2, 3: Monday thru Thursday, June 28 - July 1, 2010 (AM)  
*Additional Sessions Will Be Added If Necessary*

CAMPER'S SPECIAL NEEDS: \_\_\_\_\_

I HAVE BEEN REFERRED BY: \_\_\_\_\_

(Name of referring Camper must appear here in order for them to receive Camper referral discount.)

I give \_\_\_\_\_ (participant's name) my permission to participate in Lincoln Caverns, Inc. 'Kids Cave Kamp' I understand that I am responsible for transportation to and from Lincoln Caverns. I agree to provide emergency contact and health information as requested upon acceptance of this registration.

NAME OF PARENT/GUARDIAN: \_\_\_\_\_

SIGNATURE OF PARENT/GUARDIAN: \_\_\_\_\_

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\$90.00 fee per participant must accompany registration...  
(Less applicable discounts)

\_\_\_\_\_ Deduct \$5.00 if registration is received no later than 5/15/10 for Kids Cave Kamp 2010.

\_\_\_\_\_ Deduct \$5.00 if participant attended in 2008 and registration is received no later than 5/15/10 for Kids Cave Kamp 2010.

\_\_\_\_\_ Deduct \$5.00 sibling discount (this participant is an ADDITIONAL sibling) if registration is received no later than 5/15/10 for Kids Cave Kamp 2010. NAME of SIBLING (not receiving discount): \_\_\_\_\_

\_\_\_\_\_ Deduct \$5.00 Camper referral discount for referring: \_\_\_\_\_ to Cave Kamp 2010. We must have received this Camper's registration prior to or with your registration. Good for only one referral discount per Camper. Discount valid only on registrations received no later than 5/15/10.

YOUR CHILD'S T-SHIRT SIZE: \_\_\_\_\_ (Specify Adult or Child) Exact size cannot be guaranteed. If your child's size is not available you will be given the next larger size of T-shirt.

Thank you - we are looking forward to meeting your child at KIDS CAVE KAMP 2010!