



**April 6-8 • 9 am-12:30 pm  
Grades K-5 • Cost \$30**

**Mail to:**  
Humane Society of Kent County, Attn: Jen Self  
3077 Wilson NW, Grand Rapids, MI 49534

**Or, Fax to:**  
616-453-5752 Attn: Jen Self  
**Applications due March 25, 2009**

*For more information, call Jen at 616-791-8066  
or email her at [Jennifer@hskc.org](mailto:Jennifer@hskc.org)*

Camp Kids & Paws provides kids with a fun and interesting opportunity to learn about animal care while helping to make future, responsible pet owners.

This three-day mini-camp will feature animal interactions, presentations, crafts, games and snacks! Come prepared for lots of fun with your four-legged friends!

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Returning Camper? \_\_\_\_\_ School grade currently in: \_\_\_\_\_

Camper's T-Shirt size: (circle one) Child: S M L Adult: S M L XL

Parent/Guardian Name(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of those authorized to sign IN camper: \_\_\_\_\_

Name of those authorized to sign OUT camper: \_\_\_\_\_

Medical Considerations (allergies, physical limitations, etc.): \_\_\_\_\_

I prefer contact and confirmation via: (circle one) Postal mail Email

**Total Amount Enclosed:** \_\_\_\_\_ (\$30 for 3 half day session. \$5 off per additional sibling)

\_\_\_ Check enclosed

Visa \_\_\_ Mastercard \_\_\_ Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

In case of an accident or serious illness, I request that a Humane Society representative contact me. If the Humane Society is unable to contact me or any emergency contact, I authorize the Humane Society of Kent County to make whatever arrangements deemed necessary in the best judgment of the Humane Society of Kent County personnel.

I authorize the Humane Society of Kent County to use my child's name and image for education and public relations purposes. I understand that there are no refunds.

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_