



Camp Discover...

Art of the Forest

July 10-12, 2018

Camper Application Age 9-11

Forest Heritage Center Museum
P.O. Box 157, Broken Bow, Oklahoma 74728
580-494-6497 Fax: 580-494-6689
fhc@beaversbend.com
www.forestry.ok.gov/camp-discover

Applications may be mailed, emailed or faxed by June 22nd

Return with a \$20 check or money order

Please Type or Print:

Date of Application: _____

T-Shirt Size: Youth [] Adult [] Small [] Medium [] Large [] XL [] XXL []

Name of Camper _____

Address _____

City _____ State _____ Zip _____ Ph _____

Grade in '16-'17 school year _____ Age _____ Birth date ____/____/____ [] Male [] Female

Allergies: _____

Disabled: [] Yes List special needs: _____
[] No

Have you attended this camp before? [] Yes – What year? _____ [] No, I have never attended camp.

** Note: Preference will be given to first time campers **

I give my permission for the Forest Heritage Center to use camper's name, photo, and quotes in news releases and other publicity materials.

Parent's Name (Please Print) _____

Signed _____ Signed _____

Parent's Signature

Camper's Signature

Please answer the following questions. (Short answers only)

1. What do you feel the camper will benefit from Camp Discover?

2. During Camp Discover, what activity is the camper most looking forward to?



Office Use Only:

Date Application Received _____

Date Confirmation Sent _____