2012 SCOOTER WEEKEND
at

February 17-20, 2012
$450

Deduct $25 for each additional sibling enrolled
Camp begins Friday at 12:00 NOON Camp ends Monday at 12:00 P.M.
Check-in on Friday at Lodge from 10:00–11:30 A.M.

All parks will be open, weather permitting. Fees include instruction, open riding, recreation, meals (lunch Friday thru lunch Monday), and overnight accommodations. Campers must bring their own sports equipment and safety gear (details and more information in registration confirmation). Bring spending money for snacks in our canteen. NO CELL PHONES (public phones available). NO iPODS. Visiting Hours Monday, 2/20, 1:00 P.M. only.

Payment in full must accompany application.

- **Friday Check-In 10:00–11:30 A.M. at Lodge at Woodward West**
- **Camp begins 12:00 NOON Friday and ends 12:00 P.M. Monday**
- **Payment in full must accompany each camper's application.**
- **Campers must be covered by their own medical insurance. Medical form (sent with registration confirmation) to be completed and returned prior to arrival.**

Payment Policy

- Money order, certified checks, and credit cards will be accepted as payment for fees (do not send cash or personal check). Registration fees are due when you submit application form.
- Please note that all fees must be paid in U.S. currency via money order, certified check, or credit card drawn upon a U.S. bank located on U.S. soil. There is a charge of $30 for each bank wire and each returned check.

Refund Policy

- Anytime before February 1, 2011, upon written notice of cancellation, registration fees less $50 processing charge per session enrolled are refundable.
- After February 1, 2011, all registration fees are non-refundable.

- **No deadline to register (provided space is available).**
- **Applications will be accepted until first day of desired session (provided space is available).**

Business Office: 661-822-7900 Fax: 661-822-7902
Web: www.woodwardwest.com
E-mail: office@woodwardwest.com

REGISTRATION FORM
2012 Scooter Weekend at Woodward West

28400 Stallion Springs Drive, Tehachapi, CA 93561-5308
Business Office: 661-822-7900 Fax: 661-822-7902
(Please print clearly)

Camper's Name
Last Name First _____
Street
Address _____
_____ _____ _____
City State Zip

Father's Full Name _____
Mother's Full Name _____

Home Phone Number _____
Business Phone Number _____
Cell Phone Number _____

Desired Roommates (use full name, correct spelling a must. Submit special requests in writing.):
Please Note: Campers ages 7–9 will be placed in youth housing.
1. _____
2. _____

Birthdate _____ Age while at Woodward _____ Sex M ☐ F ☐

Enclosed is my registration fee of $450:
Payment Type:
❑ Cert.Check/M.O. ❑ Visa ❑ MasterCard ❑ Discover ❑ Am Express

Credit Card #:
|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|___|

EXP. DATE: _____ SECURITY CODE: |___|___|___|___|

Cardholder's Name:_____

Cardholder's Signature:_____

I have read and understand the refund policy: _____ (initials)

I hereby authorize the staff at Woodward West, LLC, to act for me according to their best judgment in any emergency requiring medical attention, and I hereby waive any and all claims for personal injury, illnesses and/or property damage that I may have against Woodward West, LLC, and its directors, officers, agents, employees, contractors, representatives and any volunteers in any way associated with Woodward West, LLC. I understand that participation in scooter riding, skateboarding, inline skating, freestyle BMX, mountain biking, trampoline, and all other camp activities involves motion, rotation, and height in a unique environment and as such carries with it the risk of injury. The Camp is not responsible for personal items that are lost, stolen or damaged. All medical expenses incurred will be the responsibility of the camper or the camper's family. In lieu of medical certificate signed by a medical doctor, I have no knowledge of any physical or mental impairment that would be affected by the named camper's participation in the camp program, as outlined in the camp brochure, which I have read. I also expressly grant to the Camp and any third party authorized by the camp the right to film, videotape, photograph, record the voice of and make any reproductions of the camper's physical likeness and voice and the irrevocable right in perpetuity to use, display, and digitally enhance or alter in any manner, such likeness in any media now known or hereafter devised, including but not limited to the exhibition and/or online use, broadcast, theatrically or on television, cable or radio, or any motion picture film, video tape, DVD, CD, or any published articles in which such likeness may be printed, used or incorporated, and in the advertising, exploiting and publicizing of the Camp and Camp Products.

Sign Here: _____
Parent or Guardian (Signature) Required

Date: _____

This application may be photocopied