

# Adventure Safaris Camp Registration 2009

This form is to be printed and mailed.

For faster action to reserve your spot, e-mail your name(s) and week(s) to Russ McGlenn at [russmcglenn@juno.com](mailto:russmcglenn@juno.com).

If you send by e-mail, also print and mail in order for the signatures to be on file.

Circle or check Camp Dates Requested.

See bottom of file for camp rates.

**2009 Dino Dig South Dakota:**

**June 15th - 19th**

**June 22nd - 26th**

**June 29th - July 3rd**

**Every camp begins at the orientation on Sun. evening at 8PM beginning June 14th and so on.**

**Every camp ends on Fri. at noon.**

Where or from whom did you find out about the dig? \_\_\_\_\_

## Registration Details

Name \_\_\_\_\_

Address \_\_\_\_\_

Total in the group \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Adults \_\_\_\_\_ Children \_\_\_\_\_ Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Names of others in the group Spouse \_\_\_\_\_ Other \_\_\_\_\_

\_\_\_\_\_ Child \_\_\_\_\_ age \_\_\_\_\_ Child \_\_\_\_\_ age

\_\_\_\_\_ Child \_\_\_\_\_ age \_\_\_\_\_ Child \_\_\_\_\_ age

\_\_\_\_\_ Child \_\_\_\_\_ age \_\_\_\_\_ Child \_\_\_\_\_ age

Accommodations Tent \_\_\_\_\_ Camping Trailer \_\_\_\_\_ Motor home \_\_\_\_\_ Nearby Motel \_\_\_\_\_

Photo Release I give my permission for Adventure Safaris to use photographs taken of me on this trip for their promotional purposes: Yes \_\_\_\_ No \_\_\_\_.

Due to a tax placed on us by the Standing Rock Indian Reservation we have had to increase our tuition to:

**Cost: Before May 1, cost is \$975 per family, \$500 for individuals, \$295 for students.  
After May 1, \$1075 per family, \$600 per individual and Students \$350.**

**Unaccompanied teens are \$275 each. We can usually make arrangements for guardians and transportation.**

**Please make your checks out to Russ McGlenn.**

**Mailing Address**

**Russ McGlenn  
e mail [russmcglenn{at}juno.com](mailto:russmcglenn@juno.com)  
1448 W. Sonya Ln.  
Santa Maria, CA 93458**

**Pictures on web [www.adventuresafaris.org](http://www.adventuresafaris.org)  
Video available upon request**

**Please be sure to read the information carefully. The waiver must be signed by each participant to validate booking.**

**Adventure Safaris has offered tours, field trips, and classes to hundreds of participants. We take care to provide quality programs. In exchange for participation in our dinosaur discovery camp, please sign and return the following waiver.**

**Participant Waiver**

**I understand and agree that I am participating in the above program voluntarily and at my own risk. I will not hold the landowner of the ranch where we are digging or Adventure Safaris its officers, directors, or employees liable for any negligence or other fault (not including intentional acts) that results in personal injury, death, or property damage during or in connection with the above program. The undersigned, for myself and for my heirs, executors, administrators and assigns, hereby releases and forever discharges Adventure Safaris and its directors, officers, and employees from all such claims. This waiver will be construed according to the law of the State of Minnesota.**

**Medical Release**

**I, the undersigned, hereby give my permission for Adventure Safaris to procure all necessary medical help for myself, my child or ward while said person is under the direct supervision of Adventure Safaris, and grant permission to its representatives to authorize any competent medical person to do all things reasonably necessary to take care of any injury or sickness. There is no health insurance or medical coverage provided. The signing of this form acknowledges that the participant/guardian accepts responsibility for payment of any medical treatment which may be required while they are in this program. I agree to the above participant waiver and medical release.**

**Participant's Signature: \_\_\_\_\_**

**Participant's Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**If the participant is a minor, the undersigned hereby certifies that (s)he is the parent or legal guardian of \_\_\_\_\_ and agrees to the above on behalf of him/her.**

**Parent or Legal Guardian Signature: \_\_\_\_\_**

**Date: \_\_\_\_\_**

**Emergency Contact**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: \_\_\_\_\_

Evening Phone: \_\_\_\_\_

\*\*\*\*\*

**If you just want more information, fill out and return this portion:**

**GIVE ADDRESS, PHONE AND E MAIL SO WE CAN SEND CAMP BROCHURE**

**Yes, I think I'd like to go this year. Please send a registration packet. I have circled dates below.**

**We cannot go as a family, but have a student who would like to go.**

**Please contact us about this. Our phone number is: \_\_\_\_\_**