

Gulf Islands Centre for Ecological Learning

Pender Island: SUMMER EARTH EDUCATION PROGRAM REGISTRATION FORM

Participant's Name:			
Age:	Gender:	Birthdate:	
Name of Participant'	s Parents/Guardians:_		
Island Phone Number	er:	Cell Phone:	
Other Phone Numbe	r (if applicable):		
Island Emergency Co	ontact Name & Phone	# (not a Parent or Guardi	an):
Participant's Home F	Phone Number (if differ	rent from above):	
Participant's Home A	Address:		
Parent/Guardian E-M	1ail:		
•	•	cal conditions we need to b know about in an emer	
PARTICIPANT'S Med	dical Number:		
One week for \$200.	in full. Amount enclose Two children is \$350 foo ble for families who nee inquire.	or the week.	Mail to: Gulf Islands Centre for Ecological Learning 4563 Bedwell Harbour Road