

2018 Women Of the Woods Registration Form
June 11, 2018 – June 13, 2018

First Name: _____

Last Name: _____

Home Phone Number: _____

Cell Phone Number: _____

Email Address: _____

(We will link your online registration account to this email provided)

New to Camp Esquagama? Yes No

How you learned about us: Friend or Family Member I'm a returning camper. Other

If you answered "Other" to the above question, please explain: _____

Returning campers, how many years have you attended Camp Esquagama? (Do not include the upcoming summer in your count.) _____

Address: _____

City: _____

State: _____

Zip Code: _____

County: _____

Please list any **MEDICAL/DIETARY** information you want the Camp Esquagama staff to know about:

Please list at least one emergency contact.

Name: _____

Phone Number: _____

Email Address: _____

Please Mail with \$75.00 Deposit to: 4913 Pine Lane, Gilbert, MN 55741