



**NOONAN
FARMS**

2315 Baxter Rd, Chesterfield, MO 63017

314-914-2160

Attitude is everything...Enjoy the ride

Camp 2017 Registration

Participant Name: _____

Address: _____

Parent/Guardian: _____

Phone Number(s) _____

E-Mail: _____

Age: _____

Experience: _____

Select Session: _____

Second Choice: _____

*****Complete the Release of Liability Form, Medical Treatment Form, Parent/Student Questionnaire*****

2017 Camp Dates:

June 5-9, June 19-23, July 10-14, July 17-21

Office Use

Payment and completed forms received: Liability _____
Medical _____
Parent/Student Questionnaire _____
Session Selection _____

EARLY BIRD \$400.00 if received by April 30, 2017

Payment of \$450.00 due May 15, 2017

No Refunds after May 30, 2017

Confirmation of Session to Participant sent: DATE _____