



TRAPPER'S CAMP APPLICATION 2014

School Information:

School Name: _____

Grade Level(s): _____ Number of Students: _____ Adults: _____

School Address - Street: _____ City: _____ Zip: _____

School Phone Number: _____ Teacher's Extension: _____

School District: _____

Please clearly mark your 1st and 2nd Choice: (F.A.Q. page for information)

Red Bluff

Tuesday 9/30
10 a.m.

Wednesday 10/1
10 a.m.

Thursday 10/2
10 a.m.

Friday 10/3
10 a.m.

Tuesday 9/30
12:30 p.m.

Wednesday 10/1
12:30 p.m.

Thursday 10/2
12:30 p.m.

Colusa

Tuesday 10/7
10 a.m.

Wednesday 10/8
10 a.m.

Thursday 10/9
10 a.m.

Friday 10/10
10 a.m.

Tuesday 10/7
12:30 p.m.

Wednesday 10/18
12:30 p.m.

Thursday 10/9
12:30 p.m.

Teacher's Name: _____

Home Address: Street: _____ City: _____ Zip: _____

Home Phone #: _____ E-mail: _____

Fees: Fees are \$4.00 per attendee. Make checks payable to: "Friends of Sutter's Fort"

Send Completed Applications and deposit/payment to: Sutter's Fort Trapper's Camp
2701 L Street
Sacramento, CA 95816

A \$25.00 deposit must accompany your application. Only full payment confirms your reservation.

Deadline: Full Payment must be received by Friday September 12, 2014

Contact Us:

If you have questions or need more information, please call Program Lead Steve Beck at 916 323-8112, leave a message with your phone number and the best time to return your call. Or e-mail us at steve.beck@parks.ca.gov

