

MOONDANCE 2008 APPLICATION

PLEASE INDICATE WHICH TRIP YOU ARE APPLYING FOR:

First choice: _____ Date of trip _____
Second choice: _____ Date of trip _____

PARTICIPANT INFORMATION (Please print or type)

Name: _____ Prefer to be called _____ Sex _____
Address _____
City _____ State _____ Zip _____ Home phone (_____) _____
Participant's E-mail _____
Age at start of trip _____ Date of Birth ____/____/____ Ht. _____ Wt. _____ Adult T-shirt size S M L XL
Are you attending with a friend? yes _____ no _____ If yes, who? _____

STUDENT INFORMATION (Please print or type)

Name of school _____ Current grade _____
School is (check one): Day School ____ Boarding School ____ Phone number if at boarding school (_____) _____
Sibling's Names and Ages _____ / _____ / _____

REFERENCES (List two teachers we can contact. No need to fill this in if you are an alum)

Name of teacher _____	Name of teacher _____
School Phone _____	School Phone _____
E-mail _____	E-mail _____

PARENT / GUARDIAN INFORMATION (Please give name of parents or guardian)

Dr. Mr. (Please circle)	Dr. Mrs. Ms. (Please circle)
Father's Name _____ (Prefer to be called)	Mother's Name _____ (Prefer to be called)
Father's Occupation _____	Mother's Occupation _____
Address (if different than above) _____	Address (if different than above) _____
City / State / Zip _____	City / State / Zip _____
Phone (Home) (_____) _____ ext. _____	Phone (Home) (_____) _____ ext. _____
Phone (Work) (_____) _____	Phone (Work) (_____) _____
Cell Phone (_____) _____	Cell Phone (_____) _____
FAX (_____) _____	FAX (_____) _____
Father's E-mail _____	Mother's E-Mail _____

Parents preferred email address for Moondance communications _____ mother _____ father _____
Applicant lives with: _____ both parents _____ mother _____ father _____ joint custody _____ other (please specify) _____
Who should receive all correspondence? _____ both parents _____ mother _____ father _____ other (please specify) _____

PAYMENT PLAN:

Tuition will be paid by: father _____ mother _____ other (please specify) _____
_____ Enclosed with this application is the \$800 deposit check made payable to Moondance Adventures
_____ Please charge my \$800 deposit to my: Visa _____ MasterCard _____
Name on card _____ Card Number _____
Signature _____ Expiration Date _____

HOW DID YOU HEAR ABOUT MOONDANCE? (Please check the appropriate boxes)

- | | | | | | |
|---|--|--|---------------------------------------|---|--|
| <input type="checkbox"/> Former Student | <input type="checkbox"/> Parent | <input type="checkbox"/> Friend | <input type="checkbox"/> Presentation | <input type="checkbox"/> Brochure / Catalog | <input type="checkbox"/> Summer opportunities Fair |
| <input type="checkbox"/> Web site | <input type="checkbox"/> I am an alumnus | <input type="checkbox"/> Counselor / teacher | <input type="checkbox"/> News Article | <input type="checkbox"/> Advertisement | <input type="checkbox"/> Other _____ |

If from another person, please give his / her full name for credit: _____

PARENT OR GUARDIAN OF A MINOR

I, as a parent or guardian of the below named minor, believe that my child or ward is capable of handling both the emotional and physical aspects of this trip and that he/she is enthusiastic about participating in it. I hereby give my permission for my child or ward to participate with Moondance and agree, individually and on behalf of my child or ward, to the Terms of Student / Parent Agreement and accept the terms of payment and refund policy.

Signed: _____ Date: _____ Signed: _____ Date: _____
Parent / Guardian's Signature Participant Signature

FOR OFFICE USE ONLY

Deposit _____
Expedition _____
Acknowledgement _____

To help staff learn names, please attach a recent photo to this application.

AN \$800 DEPOSIT MUST ACCOMPANY THIS REGISTRATION FORM

Forms received after March 1, 2008 should be accompanied by full tuition. If faxing an application, we must also receive a hard copy immediately.

PLEASE MAKE CHECKS PAYABLE TO: MOONDANCE ADVENTURES • P.O. BOX 8409 • ASHEVILLE, NC • 28814

Phone: 828.350.1488 • Toll Free: 800.832.5229 • FAX: 828.350.1445 • info@moondanceadventures.com • WWW.MOONDANCEADVENTURES.COM