

# Crazy's Wasewagan Camp & Retreat Summer Shuttle Release and Payment Form

Child's name \_\_\_\_\_

Contact parent name & phone # for that day \_\_\_\_\_

Please check the following:

**Session 1<sup>st</sup> \_\_ 2<sup>nd</sup> \_\_ 3<sup>rd</sup> \_\_ 4<sup>th</sup> \_\_\_\_ . . . . 1<sup>st</sup> week \_\_ or 2<sup>nd</sup> week \_\_**

**Sepulveda Park-and-Ride \_\_\_\_\_ Walmart in Duarte \_\_\_\_\_**

Fee for transportation to camp...\$60

Saturday night dinner & Sunday breakfast provided.

Sorry, we will not be providing transportation home.

**If we will be transporting your child to camp, we must have all paper work completed and full payment at least 1 week prior to 1<sup>st</sup> day of camp for directors & health staff.**

**Pick up will be on Saturdays the day before camp starts at:**

**Sepulveda Park-and-Ride - Mulholland Drive and 405 freeway between 3:30 - 4:00pm sharp.**

From 405 freeway north:

Exit Mulholland (Skirball) turn left (Skirball Center Dr). Park-and-Ride will be on immediate left.

From 405 freeway South:

Exit Mulholland (Skirball) turn right (Skirball Center Dr). Park-and-Ride will be on immediate left.

**Walmart Parking Lot - 1600 S. Mountain, Duarte 91010 between 5:00 - 5:30pm sharp. 210 & 605 Freeway**

I the Parent/Guardian of child \_\_\_\_\_

give permission for my son/daughter to drive with Camp Wasewagan staff members between the dates of June 26<sup>th</sup>, 2010 thru. August 22<sup>nd</sup>, 2010.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

I authorize Camp Wasewagan to charge my credit card for the pick-up

I have enclosed payment with our summer camp application

VISA/MC # \_\_\_\_\_

Amount \_\_\_\_\_

Exp Date \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

Signature for Credit Card \_\_\_\_\_ Date \_\_\_\_\_

Craig's cell #310-702-5572