

Dirt Bike Instruction

Private Lessons
2019



PAYMENT INFORMATION


Private Lesson: \$45/hour

Minimum of 3 lessons, private lessons scheduled individually on a mutually agreed upon day and time.

Calculate the total cost of the lesson(s):

| Session | # of Lessons | X Cost of Lesson | Sub-Total |
|-------------|--------------|------------------|-----------|
| Month | | \$ | \$ |
| Month | | \$ | \$ |
| Month | | \$ | \$ |
| Month | | \$ | \$ |
| Total Fees: | | | \$ |

PAYMENT OPTIONS:

-   
- Check or Money Order Total amt. enclosed \$ _____

Name on card (please print) _____

Card Number _____ Exp. Date _____

X _____
Authorized signature

No refunds or make-up classes. \$40 fee for returned checks.
No refund will be given for cancellations within 30 days of the first lesson.

Complete and mail this form, with full payment to:

Island Lake
12500 Camp Court NW
Poulsbo, WA 98370
360.697.1212
information@crisacamps.com

REGISTRANT INFORMATION

Last Name _____ First _____

Mailing Address _____

City _____ State _____ Zip _____

Parent/Guardian Name(s) _____

(_____) (_____) _____

Home Phone _____ Cell Phone _____

(_____) (_____) _____

Mother's Work Phone _____ Father's Work Phone _____

Email address _____

Emergency Contact / Relationship _____

(_____) _____

Emergency Phone _____

Current Grade _____ Child's Birthdate _____ Gender _____

Attended Island Lake or Miracle Ranch before? Yes No

Which camp? _____ Year _____

Emergency Consent and Photo Release: I hereby give my consent for my child to participate in camp activities, and receive routine and/or emergency medical care from a physician or emergency facility, in case I cannot be reached in an emergency. I give my permission for CRISTA to use any photos taken of me or my family at any CRISTA event in their publications, and I release all rights to remuneration for such photos.

X _____
Parent/Guardian Signature

OFFICE USE ONLY

Weekday: _____

Time: _____

Instructor: _____

Date Registered: _____

Notes: _____
