

# Surfin Fire, Inc. Oceanside Pier 2020

Mail to: Surfin Fire, Inc., 6714 Lemon Leaf Dr., Carlsbad, CA 92011 Office: (760) 438-0538

## SUMMER SURF CAMPS:

**Circle: Morning Surf Camp AM 9-12 or Afternoon Camp 12:30-3:30**

<b>Session 1:</b> June 8-12	<b>Session 2:</b> June 15-19	<b>Session 3:</b> June 22-26
<b>Session 4:</b> June 29-July3	<b>Session 5:</b> July 6-10	<b>Session 6:</b> July13-17
<b>Session 7:</b> July20-24	<b>Session 8:</b> July 27-31	<b>Session 9:</b> Aug 3-7
<b>Session 10:</b> Aug 10-14	<b>Session 11:</b> Aug 17-21	<b>Session 12:</b> N/A

For further info on our surf camp curriculum, coaching philosophies, & mission statement logon to [www.surfinfire.com](http://www.surfinfire.com)!

**SESSIONS:**

Teen Surf Camp (ages 13-17) M-F  
 Grommet Surf Camp (ages 8-12) M-F  
 Adult Surf Camp M-F  
 3 Day Surf Camp M-F  
 Surf Camp Daily Drop-In: M-F  
 Ripper Snappers (ages 5-7) M-F

**PRICING:**

\$225  
 \$225  
 \$250  
 \$175  
 \$65  
 \$450

**DATES:**

Session #: \_\_\_\_\_  
 Session #: \_\_\_\_\_  
 Session #: \_\_\_\_\_  
 Circle Days: \_\_M\_T\_W\_Th\_F\_\_  
 Desired date/s: \_\_\_\_\_  
 Session #: \_\_\_\_\_

**\*\*\*\*\*Military discount 20% off (must show ID upon arrival)**

**Sat & Sun** 9-11AM or 11AM-1PM \* All ages kids & adults Weekend Clinic \$100 \_\_\_\_\_

**REGISTRATION INFORMATION:**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_  
 Male: \_\_\_\_\_ Female: \_\_\_\_\_ Home Address: \_\_\_\_\_  
 City \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 List medical conditions if any: \_\_\_\_\_ Food Allergies: \_\_\_\_\_  
 Allergies: \_\_\_\_\_ Medications: \_\_\_\_\_  
 Parent/Guardian's Name: \_\_\_\_\_ Disability/Concerns: \_\_\_\_\_  
 \_\_\_\_\_  
 Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Mobile Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**ENCLOSED REGISTRATION FEES: Deposit of \$100.00 is required to secure spot!**

\_\_\_\_\_ Deposit ONLY \$100.00  
 \_\_\_\_\_ Entire Fee: \_\_\_\_\_ Partial Payment: \_\_\_\_\_ Balance Due: \_\_\_\_\_  
 \_\_\_\_\_ **I understand my balance due 1 week prior to surf camp/clinic start date.**

**PAYMENT METHOD: Check #:** \_\_\_\_\_ **Amount:** \_\_\_\_\_ Make payable to: **Surfin Fire, Inc.**

**Credit:** MasterCard: \_\_\_\_\_ Visa: \_\_\_\_\_ Amex \_\_\_\_\_ Discover: \_\_\_\_\_  
 Credit Card #: \_\_\_\_\_ Expiration Date: \_\_/\_\_/\_\_\_\_ Code: \_\_\_\_\_  
 Card Holder's Name (Print): \_\_\_\_\_  
 Card Holder's Signature: \_\_\_\_\_

**REFUND POLICY:** No refunds will be given with 7 days prior to the start date of the session attending. Make-up days only for inclement weather and no refunds after camp has begun.