

Youth Leadership Camp

Teen's Information

First Name (Name Tag):	Middle Initial:Last Name:
Birthday: (mm/dd/yyyy)	Age: Gender: Gender: Female
Address:	
City:State/Prov	.:Zip/Postal Code:Country
Teen's Home Phone: ()	Teen's Cell Phone: ()
Best phone number to reach teen at, (circle	one): Home Cell Teen's E-Mail:
Name of the person enrolling the teen:	Relationship
E-Mail:	phone number:
<u>Par</u>	ent/Guardian Information
1. Parent/Guardian First Name:	Initial:Last Name:
	emergency: ()
	Initial: Last Name:
	nergency: ()
E-Mail:	
Dates Date: July 9-14, 2024	
For more information contact	Kari Ramon Ph: (707)559-7731 Email: Kari@klemmer.com
Tuition	paid in US Dollars: \$2395.00
tuition is non-transferable. Tuition must be paid in full after which the full tuition applies. Tuition must be pai of the start date of the YLC identified on this form. Clais non-refundable after 180 calendar days of the date whichever is first to occur. If the teen identified on this be used to attend YLC at a future time. All requests for	of Youth Leadership Camp ("YLC") tuition is non-refundable upon receipt by Klemmer. All within 10 business days of the date of any offered discount to be eligible for the discount d in full before YLC begins. Klemmer cannot accept checks dated within 10 business days as size may be limited and payment in full is required to reserve a seat at YLC. All tuition the initial payment is made or once the teen identified on this form has begun the camp, form is unable to attend YLC on the date specified on this form, the fully paid tuition can refunds on refund-eligible tuition must be requested in writing with proof of payment and epartment, within 180 calendar days of date of the initial payment. Please call the YLC where prohibited by law.
In completing this enrollment form I a conditions of the tuition/refund policy	ncknowledge and fully understand and agree to the terms and y.
Signature:	Date:
	cally, typing your name on the line above acknowledges the terms of this ture. Any photocopy, facsimile, electronic or other copies of this agreement signed original.
Payment:	
□ Cash □ Check, Payable to K&A □ Money	Order □ Visa □ MasterCard □ Discover □ Amex
Card Number:	V Code:
Amount:Name on Card:	
Billing Address (if different from home):	Zip:

Please make your payments to: Klemmer

Klemmer & Associates Inc.