

# Rock Dimensions, Inc. Kids' Adventure Camp 2010

*The following Summer Camp registration form is to be completed in conjunction with Rock Dimensions' general medical/registration form and liability agreement. Please complete all three forms and return to Rock Dimensions along with a 50% deposit. Mailing address:*

Rock Dimensions  
131-B S. Depot St.  
Boone, NC 28607

Name of participant: \_\_\_\_\_ Age: \_\_\_\_\_

Climbing experience (no experience necessary!): \_\_\_\_\_

Please check which week you plan to attend:

\_\_\_\_\_ June 28-July 2                      \_\_\_\_\_ July 12-16                      \_\_\_\_\_ July 26-30

If not attending the whole week, list specific dates: \_\_\_\_\_

**Cost:** \$500 full week, \$300 for half-week (first 3 days or last 3 days). Call for other options.  
Includes RD t-shirt.

Amount enclosed: \$ \_\_\_\_\_

***\*Additional parent/guardian contact information:***

Cell phones: \_\_\_\_\_

Local phone numbers (if not on the medical/registration form):  
\_\_\_\_\_

E-mail address: \_\_\_\_\_

Any other information:  
\_\_\_\_\_

Authorization to Use Photographs

I agree to release any images of me/my child captured by means of photography while I am a participant with Rock Dimensions. Rock Dimensions may use the above mentioned, without limitation, in connection with any brochure, publicity, marketing, or educational materials. I release Rock Dimensions from any claims whatsoever that arise in said regard.

Participant signature \_\_\_\_\_ Parent/Guardian signature \_\_\_\_\_