

Financial Information:

Camper Fee (\$395) \$ _____

Scholarship- Please help us help others \$ _____

Weekend Meal Pass Non-Rider (\$60) \$ _____

(All meals are provided for riders)

TOTAL \$ _____

Less Registration Deposit \$ _____

(minimum of \$100 deposit required)

Camper Balance Due \$ _____

Make checks payable to: **TN FCA MX** (please write "off-road camp" in memo.)

Credit Card Information:

Credit Card Type: _____

Name on Card: _____

Card Number: _____

Exp. Date: _____ Code: _____

Billing Address for this Card: _____

Remaining balance must be paid with cash or check on the day of the event.

Credit Card enrollment will be accepted up to and including Monday, July 12th

Child Care Services:

Child Care is available as needed.

How many children? _____ Age(s): _____

Fax or Mail to:

615-790-7257

2010 TN FCA Off-Road Camp
 c/o Rose Carney
 1406 Saybrook Trail
 Thompson's Station, TN 37179

OFFICE USE ONLY Name on check: _____

Check No. _____ Amount: \$ _____ Date: _____

Camp Fees Included: