

Education Program Request Form

Summer Camp



Name:

Phone Number:

Email:

Camper Name(s):

Age/Grade Level:

Camper T-shirt Size:

Are you a member? If yes, provide member number:

Mailing Address (*Please include county):

Please select if you will be needing extended care.

Before Camp Care

After Camp Care

Please select the week(s) of camp you are signing up for:

Ages 4 – 5:

July 8 – 12: Animals A - Z

August 5 – 9: Penguins and Friends

Ages 6 – 11:

June 17 – 21: Woodland Adventures

June 24 – 28: Days in the Desert

July 8 – 12: Jungle Journeys

July 15 – 19: Splash into Summer

July 22 – 26: Magnificent Mountains

July 29 – August 2: Polar Explorations

August 5 – 9: Conservation Quests

Ages 12 – 14:

August 12 – 16: Junior Zookeeper Camp

Staff Use Only:

Program Contract: ____

Emailed customer: ____

Input to Google: ____

File in Binder: ____

Please email this form to: edureservations@lvzoo.org

It may take up to 72 hours to get a response, as we answer requests in the order in which we receive.