

Coyote Hill Mountain Bike Camps

Registration and deposit form – please print and send in with \$200 deposit

Name: _____

Address: _____

City: _____

State: _____

Zip: _____

Phone: _____

Age: _____

Female: _____ Male: _____

Overnight Camper: _____ Day Camper: _____ Adult: _____

Parent or Guardian Day Phone: _____

Parent or Guardian Name: _____

Session Date(s): _____

To reserve a spot please send your \$200 deposit to:

Coyote Hill Mountain Bike Camps
P.O. Box 212
Bradford, VT 05033