



Night Owls/Predator Project registration form. Print to mail or fax.

TEACHER INFORMATION

Name: \_\_\_\_\_
School phone: \_\_\_\_\_
Fax Number: \_\_\_\_\_
Cell phone: \_\_\_\_\_
Email Address: \_\_\_\_\_

SCHOOL INFORMATION

Name: \_\_\_\_\_
Address: \_\_\_\_\_
City: \_\_\_\_\_
State: \_\_\_\_\_ Zip: \_\_\_\_\_

PARTICIPANT INFORMATION

Grade level: \_\_\_\_\_
Number of students: \_\_\_\_\_
Number of adults: \_\_\_\_\_

\*\*\* Maximum of 100 people total \*\*\*
Siblings, including infants, are not permitted to attend
Estimate carefully! This total will be your minimum guarantee.
Your group will be held financially responsible for this number of participants

SLEEPOVER DATE CHOICE(S)

1st choice: \_\_\_\_\_ 2nd choice: \_\_\_\_\_

- checkbox Night Owls (students 3rd-6th grade only)
checkbox Predator Project (students 6th-8th grade only)

If neither choice is available, you will be notified immediately. Otherwise, you will receive a confirmation packet via mail within 6 weeks.

Print and mail this form with a check, credit card, or purchase order to:
San Diego Wild Animal Park, Attn: Education Dept.
15500 San Pasqual Valley Road
Escondido, CA 92027

Print and fax this form (credit card deposit required) to: 760-796-5612