



# SWS Lake Joseph Club Ski School

## CAMPER APPLICATION

CONTACT INFORMATION	
Name: _____	Cottage #: _____
Email Address: _____	Mailing Address: _____
EMERGENCY INFORMATION	
Emergency Contact: _____	Emergency Phone Number: _____
Allergies: _____	Alternate Phone Number: _____
Injury History: _____	
PAYMENT INFORMATION	
Name on Card: _____	Expiry: _____
Card Number: _____	CVS Code: _____
Signature: _____	Date: _____