

ESS Pinewoods 2009 Application

Please fill out one (1) application per person. You may photocopy this form as needed.

Mail your application(s) and all check(s) [**payable to RSCDS-Boston Branch**]
to: Tom Spilsbury, 618 Mississippi Avenue, Silver Spring, MD 20910.

Name: _____ Age (if younger than 21): _____

Full Address (Return address labels are acceptable):

Primary telephone (circle: Day, Night, Both): _____

Secondary telephone (for registrar only: D/N/B): _____

E-mail (please print very carefully): _____

May we list your contact information in the camper directory?

Yes all

No, not: Address, Primary phone number, E-mail

Are you applying with someone else? Name: _____

Are you a member of: CDS-BS _____ RSCDS (list branch) _____

First time at Pinewoods: [yes/no] First time to ESS: [yes/no]

<input type="checkbox"/> I am interested in a kitchen work position in exchange for half the camper fee.
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Check enclosed for: Deposit amount _____ or Full Payment _____.

Please make checks **payable to RSCDS-Boston Branch**, and note that it is for ESS 2009.

If you are making a deposit payment only, note on your calendar that full payment is due by 1 June 2009.

Further questions, contact Tom Spilsbury at 301-585-7857 or ESSregistrar@gmail.com.