



"Symmetry in Nature"

15–19 August 2025

35th (Almost) Annual Adult Session

REGISTRATION FORM

Total fee is \$400

Name: _____ Gender: _____ Pronouns: _____

Address: _____
Street or P.O. Box City State Zip

E-mail Address: _____ Telephone (day): _____ (evening): _____

Please send information by: E-mail Postal mail I plan to **arrive** (when): _____
(circle one)

depart (when): _____

- I would like to request a lower bunk bed (check if yes)
- I am fully omnivorous and am prepared to eat a variety of foods while at camp.
- I am a vegetarian of this type:
 - Semi-vegetarian (no pork or beef)
 - Pesco (no pork, beef, or chicken)
 - Lacto (no meats, fish, seafood, or eggs)
 - Ovo (no meats, fish, seafood, or dairy)
 - Lacto-ovo (no meats, fish, or seafood)
 - Vegan (no meats, fish, seafood, eggs, or dairy)
- I have the following other dietary restrictions: _____

(Please circle one choice for each statement below.)

I **consent** / do **NOT** consent to allow Nature Camp to share my address, e-mail address, phone number with other AS participants.

I **consent** / do **NOT** consent to allow Nature Camp to use my image, likeness, voice recording, or writing for promotional purposes.

For new Adult Session campers: Please tell us how you learned about Nature Camp's Adult Session.

Please provide the name of someone to be contacted in case of an emergency.

Name: _____ Relationship to you: _____

Telephone (day): _____ (evening): _____

Amount enclosed: _____ Return registration form to: _____ For more information please

(\$400 per person)

Make checks payable to
Nature Camp Inc.

Philip Coulling
310 Enfield Rd.
Lexington, VA 24450 (before June 8)
316 Nature Camp Trl.
Vesuvius, VA 24483 (after June 8)

call: 540-460-7897
e-mail: director@naturecamp.net

Early registration is recommended, as space is limited.