

BILLING AND PARTICIPATION FORM

Upham Woods Outdoor Learning Center

DATE: _____ **GROUP NAME:** _____

It is IMPERATIVE that this form be filled out and returned to an UPHAM WOODS staff member BEFORE your group departs. Complete sections 1-2 for both ADULTS and YOUTH and section 3 for YOUTH.

Section 1 - PARTICIPATION								
	YOUTH				ADULT			
	HISPANIC		NON-HISPANIC		HISPANIC		NON-HISPANIC	
	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE	MALE	FEMALE
WHITE								
BLACK								
AMERICAN NATIVE								
ASIAN								
HAWAIIAN/PAC.ISLAND								
WHITE & BLACK								
WHITE & AM. NATIVE								
BLACK & AM. NATIVE								
WHITE & ASIAN								
OTHER/MIXED								
TOTALS								

GRAND TOTAL YOUTH _____ **GRAND TOTAL ADULTS** _____

Section 2 – LODGING NUMBERS						
	CABINS		DORM		OUTPOST	
	YOUTH	ADULTS	YOUTH	ADULTS	YOUTH	ADULTS
NIGHT #1						
NIGHT #2						
NIGHT #3						
NIGHT #4						
NIGHT #5						
DAY USE NUMBERS (only list persons not included in Lodging Numbers above)			PLEASE CHECK ONE			
	YOUTH	ADULTS	4-H			
DAY 1			SCHOOL			
DAY 2			CHURCH			
DAY 3			SCOUTS			
DAY 4			EXTENSION			
DAY 5			OTHER			

Section 3 - YOUTH NUMBERS		
Approx. AGE	NUMBER	GRADE
6 or Younger		K
7 YEARS		1
8 YEARS		2
9 YEARS		3
10 YEARS		4
11 YEARS		5
12 YEARS		6
13 YEARS		7
14 YEARS		8
15 YEARS		9
16 YEARS		10
17 YEARS		11
18 YEARS		12
Total = _____		