



A Hard Day's Knight™

The Summer Intensive

Welcome to the Squirehood Program!

Participant's name _____ D.O.B. _____

Residence _____

Shire _____

Kingdom Code _____

Home Phone _____

Sire's name _____

Contact at _____

Matron's name _____

Contact at _____

Totemic Animal: _____

Favorite Regret: _____

Places in the world you most want to visit: _____

Favorite sound: _____

Favorite day: _____

Favorite Game: _____

What are a few defining traits of the adult you want to become?

One piece of advice from the child you were:



I, the undersigned, attest under penalty of perjury that the above-stated information is true and correct to the best of my knowledge.
For the sake of experience and of adventure, I agree to suspend disbelief in order to fully and whole-heartedly participate in the Quest, continuing through the summer of 2005, and never quite ending.

Participant's Signature:

Parent or guardian signature (if applicable):

Date: _____

