

CAMP RED TAILS X JULY 2004 APPLICATION

Date _____ NAME _____

Address _____

City State Zip _____

Phone _____ e-mail _____

Any special needs _____ (attach page if required)

Medical needs _____

Special Food requirements _____

May we have a camper in your area contact you to meet or talk? By phone , e-mail

Other information:

Age _____ Height _____ * Weight _____ *

Sexual Orientation: Gay Straight Bisexual **

(Include or attach photo - if possible - face preferred)

Do you identify yourself as:

Top bottom switch

Experience level:

Expert , very experienced , experienced

somewhat experienced , limited experience

Beginner , Novice , virgin

Specialty _____

Fantasy _____

What I would most like at camp _____ (attach page if required)

What I would not like at camp _____ (attach page if required)

Mail this application to:

MHF

11288 Ventura Blvd #440B

Studio City CA 91604

or e-mail it to:

mhf@manshandfilms.com

* requested information

** The camp is entirely male! Most participants are Gay but not exclusively.

We do not discriminate by age, race, size, or sexual orientation.

Attitude and respect for others is paramount.
