

# 2008 CAMP WHITE MEADOW APPLICATION

This Application Cannot Be Processed Unless Completely Filled Out

Camper's Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Sex \_\_\_\_\_ Age \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade in Sept. \_\_\_\_\_

Parent or Guardian's Full Name \_\_\_\_\_ Lake Address \_\_\_\_\_ Home Phone # \_\_\_\_\_

Responsible Party's Name \_\_\_\_\_ Email: \_\_\_\_\_

Fathers Business Phone # \_\_\_\_\_ Beeper/Cell # \_\_\_\_\_

Mothers Business Phone# \_\_\_\_\_ Beeper/Cell # \_\_\_\_\_

**In case of an emergency, we MUST have another person to contact if parent or guardian cannot be reached.**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Phone # \_\_\_\_\_

Will child need to take medication during camp? \_\_\_\_\_ (If yes, medication form MUST completed)

**PLEASE CHECK THE SESSION YOUR CHILD WILL BE ATTENDING- 50% DEPOSIT  
REQUIRED AT TIME OF APPLICATION EXCEPT FOR 5% DISCOUNT.  
5% discount on basic camp fee only if paid in full by February 9<sup>th</sup>, rates increase after March 29<sup>th</sup>.**

FULL DAY SESSION	DATES	EARLY BIRD 50% DEPOSIT FEE AFTER			LATE FEE
		RATES	by March 29th	March 29 <sup>th</sup>	
_____ 7 Weeks	6/30-8/15	\$975.00	\$487.50	\$1,050.00	\$1,100.00
_____ 6 Weeks	6/30-8/8	\$925.00	\$462.25	\$1,000.00	\$1,050.00
_____ 6 Weeks	7/7-8/15	\$925.00	\$462.25	\$1,000.00	\$1,050.00
_____ 4 Weeks	6/30-7/25	\$705.00	\$352.50	\$780.00	\$830.00
_____ 3 weeks	7/28-8/15	\$588.00	\$294.00	\$663.00	\$713.00

**Half Day Pre-School & Kindergarten-Morning Sessions only (9:30a.m.-1p.m.)**

_____ 7 Weeks	6/30-8/15	\$600.00	\$300.00	\$675.00	\$725.00
_____ 6 Weeks	6/30-8/8	\$550.00	\$275.00	\$625.00	\$675.00
_____ 6 Weeks	7/7-8/15	\$550.00	\$275.00	\$625.00	\$675.00
_____ 4 Weeks	6/30-7/25	\$485.00	\$242.50	\$560.00	\$635.00
_____ 3 Weeks	7/28-8/15	\$400.00	\$200.00	\$475.00	\$525.00

**TRANSPORTATION** Request for transportation MUST BE RECEIVED BY JUNE 14<sup>th</sup>

Cost		Cost	
_____ 7 Weeks	\$245.00	_____ 7 weeks-1/2 day Pre-S/kinder*	\$125.00
_____ 6 Weeks	\$210.00	_____ 6 weeks-1/2 day Pre-S/Kinder*	\$105.00
_____ 4 Weeks	\$140.00	_____ 4 weeks-1/2 day Pre-S/kinder*	\$70.00
_____ 3 Weeks	\$105.00	_____ 3 weeks-1/2 day Pre-S/Kinder*	\$53.00

\*A.M. pick up ONLY-Parents pick up at camp at 1p.m.

**EARLY MORNING DROP-OFF/ LATE AFTERNOON PICK-UP**

Drop off after 7a.m. Late Pick-up to 6 p.m. sharp

\$65.00 per week, AM & PM per child

\$37.50 per week for AM or PM per child

Week 1 \_\_\_\_\_ Week 2 \_\_\_\_\_ Week 3 \_\_\_\_\_ Week 4 \_\_\_\_\_

Week 5 \_\_\_\_\_ Week 6 \_\_\_\_\_ Week 7 \_\_\_\_\_

AM \_\_\_\_\_ PM \_\_\_\_\_ AM & PM \_\_\_\_\_ Total Due \_\_\_\_\_

An extra charge will occur if child is picked up after 6 p.m.

**FOR OFFICE USE ONLY**

	Date	Initials
Rec'd	_____	_____
Roster	_____	_____
Posting	_____	_____
Medical	_____	_____
Camp	_____	_____
Copy	_____	_____
Billing	_____	_____
Posting	_____	_____

**T-SHIRT SIZE: (Circle one)**

**YOUTH SMALL MEDIUM LARGE ADULT SMALL ADULT MEDIUM ADULT LARGE ADULT XL**

Extra shirts-\$10.00 each \_\_\_\_\_

**PLEASE REFER TO BACK SIDE OF APPLICATION--MUST BE SIGNED BY PARENT/GUARDIAN**

**CAMP WHITE MEADOW 2008**  
**IMPORTANT NOTES**

Please read carefully-

- Basic Camp Fees (not transportation, Pre/Post Camp Care or Teen Travel) are **discounted 5% if paid in full by February 9<sup>th</sup>**. A retroactive discount will not apply if changes are made after February 9<sup>th</sup>.
- Early Bird Registration**, with a 50% deposit, must be made by **March 29<sup>th</sup>**. All Camp Fees Must Be Paid In Full By May 31<sup>st</sup>. A late Fee of \$25.00 will be assessed if payments are made after May 31<sup>st</sup>.
- Changes made after the original application will be assessed \$25.00. This does not include upgrades from 3 to 6 week, 6 to 7 week period, or 3 to 7 week periods.
- Medical Record Forms are due Saturday, June 14<sup>th</sup>**. For Medical Record forms received after June 14<sup>th</sup>, a late fee of \$10.00 per form will be assessed. Medical Record forms will be required prior to camper attending camp. **Please call your doctor now** to schedule physical exams so these deadlines can be met.
- A Camper on special medication must have a "Medication Form" completed. Our staff will not be permitted to administer medication without this completed form. Please contact the P.O.A. office for a copy of this form. It must be completed by a physician.
- Request for bus transportation must be made by June 14<sup>th</sup>**.
- Parents wishing to attend off-site trips must sign-up with the Camp Director/Assistant Director in advance. The parent must pay transportation, entrance fees and any additional expenses. Additional information and sign-up sheets will be provided.
- Campers should **NOT** be dropped off at camp prior to 9:15a.m. and **MUST** be picked up prior to 4:40p.m. A \$10.00 fee will be assessed after 5:00p.m.
- Camp White Meadow is NOT responsible for personal items lost by campers.

**A. Moving:**

1. Moving before first day of camp- Camp fee will be refunded, less \$50.00
2. If registered for 7 weeks and moves after 4 weeks, refund will be the difference between 4-week price and 7 week price ONLY. A \$50.00 charge will be assessed.

**B. Camp Fee:**

1. Up to May 31<sup>st</sup>-full refund-less \$50.00
2. After May 31<sup>st</sup>, up to beginning of camp-50% refund less \$50.00

**AFTER CAMP BEGINS, THERE WILL BE NO REFUNDS.**

Exception: Signed up for 7 weeks-went less than 4 weeks-reduced to the 4-week price.

**AFTER 4<sup>TH</sup> WEEK-NO REFUNDS-NO EXCEPTIONS**

**PLEASE INITIAL**

\_\_\_ I allow the use of photos of my child in the pertinent website, brochures or promotional materials.

\_\_\_ I do **NOT** allow the use of photos of my child in the pertinent website, brochures or promotional materials.

**Parent/Guardian Acknowledgement of Camp White Meadow Procedures**

I, \_\_\_\_\_, acknowledge reading the camp procedures as outlined on this  
Print name

application and agree to abide by them as printed.

Signature: \_\_\_\_\_  
Parent/ Guardian