

FREE SPIRIT NATURE CAMP



2010 REGISTRATION FORM

Child's Name: _____ Age: _____

Date of Birth: _____ Grade in Sept: _____

Parents/Guardians: _____

Home Address: _____

Home Phone: _____ E-Mail: _____

Work/alternate phone: _____

A health form and medical information form are also required.

Forms can be downloaded from the website. WWW.FreeSpiritNatureCamp.Com

Check here if you want the health forms mailed to you.

NEW! Each enrolled camper receives a camp drawstring backpack – perfect for storing belongings in cubbies.

CAMP Program Hours 9:30 am to 4:00 pm

Extended care available from 4:00 until 5:30 pm OR 8:00 am until 9:30 am
\$40/Week or \$10.00/day per AM or PM period

TRANSPORTATION: We run a 15-passenger van that meets campers at central meeting places. Currently Pickups are planned in Bullville, Circleville, Middletown, Goshen, Warwick, Florida & Pine Island. Inquire for other areas.
Transportation Fee: \$75/week am & pm. \$120 per week per family.

In the event your desired session is full we will notify you immediately and keep a waiting list of campers in the order received.

CHOOSE YOUR DISCOUNT

Please do not combine except 2nd child.

Discount 1 Take 8% off tuition when **paid in full** before 3/31

Discount 2 Take **5% NOW 8%** off tuition with registration for 7 or 8 wks

Discount 3 Take 5 % off tuition for second child in same family

Inquire for rates for three or more children

2010 ENROLLMENT SESSION DATES & COSTS

Session 1.....June 29 – July 2\$235.00 + _____
4 days, Tu – Friday

Session 2July 6 – 9\$235.00 + _____
4 days, Tu - Friday

Session 3July 12 – 22\$489.00 + _____
9 days M-F, M-Th

Session 4.....July 26 - August 5.....\$489.00 + _____
9 days M-F, M-Th

Session 5August 9 – 19\$489.00 + _____
9 days M-F, M-Th

TOTAL TUITION _____

Subtract Discounts _____ type _____

Subtotal _____

AM PM Extended Day Fee + _____

Transportation Fee + _____

Size _____ Optional Tee-Shirt (\$20) + _____

Optional Klean Kanteen 18oz Steel Water Bottle (\$22) + _____

Insurance Fee + \$35.00

TOTAL AMT DUE _____

Amount Enclosed/pd _____

Balance Due 6/15 _____

TERMS: Your signature on this contract accompanied by payment holds a space for your child. Registration can be changed only under special arrangements with the Director, when available. Remittance should be in full or as follows: 1/3 payment now with this signed contract. 1/3 by May 31, 2010, and 1/3 by June 15. Special payment arrangements are available upon request. All balances not paid in full by June 15 are subject to a \$25 late fee, unless arrangements have been made. Refund Policy: Registrations withdrawn prior to June 15 will be reimbursed in full less a \$50 nonrefundable registration fee. Refunds requested after June 15 will be processed if the child's space can be filled prior to the start of the session. Refunds requested after June 15th, and requests for make-up days will be approved solely at the discretion of the Camp Director. Make-up days are not guaranteed. CAMP ENROLLMENT AGREEMENT: I understand that part of the camping experience involved activities, group arrangements and interactions that may be new to my child. These things come with certain risks and uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks and I am assuming them on behalf of my child. I realize that no environment is risk free and so I have instructed my child on the importance of abiding by the camp rules. My child and I both agree that he or she is familiar with these rules and will obey them. I do hereby grant the right to use my or my child's photograph or image without my child's name both single and in conjunction with other persons or objects for any and all purposes including, but not limited to private or public presentations, advertising, publicity, and promotion relating hereto.

Signature parent/guardian _____ Date _____

Make Checks Payable to FREE SPIRIT NATURE CAMP

Mail Address: PO Box 56 Circleville, NY 10919-0056

(845) 361-CAMP (2267)

