Registration for Summer Camp 2019

You can also register online at any time at www.camptecumseh.org

Office : Code Dep

Please print neatly: Camper First Name Camper Last Name

Gender ☐ Male ☐ Female Birth Date / / Age by Camp Grade Completed by Camp 2019

Family Address

City State ZIP Code

Parent / Guardian Home Phone – – Parent / Guardian Cell Phone – –

This will be my year attending Overnight camp This will be my year attending Equestrian camp (if applicable)

Cabin Mate Request - **Multiple names will not be accepted**

Camp Tecumseh strives to meet all mutual, one-to-one cabinmate requests when campers are of similar age. In order to provide the best camp experience for all, Camp Tecumseh will not place groups larger than two or three together. Cabinmate requests must be received at least two weeks prior to the start of camp.

Mother / Guardian First Name Mother / Guardian Last Name

Mother / Guardian Home Phone – – Mother / Guardian Work Phone – – Mother / Guardian Cell Phone – –

Mother E-mail Address _____

Father First Name Father Last Name

Father Home Phone – – Father Work Phone – – Father Cell Phone – –

Father E-mail Address _____

METHOD OF PAYMENT: Registration payment must accompany registration

Please note - fee payment is less complicated for both camp and families if payments are done by credit or debit card. **Registration fees are $75 per week per camper for Overnight camp, Equestrian camp and CILTS, and $200 per week per camper for Adventure Trips. To hold your space this fee must be paid.** Please see our camp session listings on the other side of this form for full program prices. Trading post accounts will be charged at this time.

☐ Charge entire camp fee now. **(Please write your credit card information below.)**

☐ **I want the payment plan.** Only charge the registration fee now. The balance will be charged to the credit card in equal payments each month until April. **All fees are due by April 1st.**
(Please write your credit card information below.)

Choose One:
☐ **1st of the Month**
☐ **15th of the Month**

☐ I've enclosed a check for the registration fee, and will make full payment by April 1st via check or online payment.
(No statements will be sent)

☐ I've enclosed a check for the entire camp fee.

Credit Card Number

Expires (MM/YY) /

☐ **Visa**
☐ **Mastercard**
☐ **Discover**
☐ **American Express**

Card Holder _____

Signature _____

Date _____

If you have any questions don't hesitate to call us! (765) 564-2898, or e-mail registrar@camptecumseh.org.
Office hours are 8:00 to 5:00 (Eastern time), Monday through Friday. Registration questions can only be answered during these hours.
Mailing address: 12635 W. Tecumseh Bend Rd, Brookston, IN 47923.
Registrations can be faxed to (765) 564-3210. (Please call us to confirm receipt of faxed registrations)

The USDA is an equal opportunity provider and employer.

Camper Last Name _____ First Name _____

Registration for Summer Camp 2019

You can also register online at any time at www.camptecumseh.org

Registration fee is $75 per week for Overnight camp, Equestrian camp, and CILTs. Registration fee is $200 per week for Adventure trips. Your registration fee is applied towards your total fee and must be paid to hold your space.
All camp fees are due by April 1, 2019

Dates

2019 Summer Camp Dates	June 9-15	June 16-22	June 23-29	June 30-July 6	July 7-13	July 14-20	July 21-27	July 28-August 3	August 4-10
Overnight Camp $695 Ages 8-15	☐ Week 1	☐ Week 2	☐ Week 3	☐ Week 4	☐ Week 5	☐ Week 6	☐ Week 7	☐ Week 8	☐ Week 9
Horsemanship Clinic Overnight Campers $75	☐ Week 1	☐ Week 2	☐ Week 3	☐ Week 4	☐ Week 5	☐ Week 6	☐ Week 7	☐ Week 8	☐ Week 9
Equestrian Camp $785 Ages 11-15	☐ Week 1	☐ Week 2	☐ Week 3	☐ Week 4	☐ Week 5	☐ Week 6	☐ Week 7	☐ Week 8	☐ Week 9
Multi-Week Discount: Campers enrolled in two weeks of camp (Overnight or Equestrian) receive $15/2-week discount									
CILTs $1300 Ages 16-17 Completed 10th Grade	☐ Session 1		☐ Session 2		☐ Session 3				
Adventure Trips Ages 13-17 Registration Fee: 1 week = $200 2 weeks = $400		☐ Whitewater Rafting I $1030			☐ Colorado Backpacking $1960		☐ Horse Pack Trip $1120 (Requires 2 years Tecumseh Equestrian Camp or Director approval	☐ Whitewater Rafting II $1030	

Trading Post: Camp Tecumseh recommends a $50/week trading post account. This amount will be added on to your fees. At the end of your camper's week, any money that is not spent will be returned to your credit card.

☐ Yes, charge $50/week for my camper's trading post account. OR ☐ Please charge $_____/week for my camper's trading post account

☐ I opt to donate any remaining trading post money under $10 to the Campership fund to help send campers in need to camp

Camper Last Name _____ First Name _____

Important! Please read and understand this agreement before signing!

I certify that in case of accident or illness, the director on duty has my authority to secure medical attention if unable to communicate with me directly. I understand that the camp fee does not include accident insurance. I agree to the release of any records necessary for treatment, referral, billing, and insurance purposes. I understand that no refunds are given if a child leaves early for any reason. I give permission for Camp Tecumseh to use photos or videos of my child for promotional purposes. **I understand that the registration fee ($75/wk for Overnight & Equestrian; $200/wk for Adventure trips) is a registration charge and is not refundable nor transferable under any circumstances.** Adventure Trip registration fees are not transferable to other camp programs. **I understand that cancellations for any session or program, for any reason, within 30 days of camp will receive no fee remission. All camp fees are due by April 1st.** All cancellations prior to the camp date must be received in writing. Confirmations of the receipt of cancellation notice will be sent to you by return mail / E-mail. If you do not receive a confirmation for cancellation, camp has not yet received your cancellation notice and no refund will be given. Camp Tecumseh has the right to cancel any program due to unforeseen circumstances. A fully completed health form, signed by a physician, is required by camper's first day of camp. For every day these fully completed forms are not in camp, a fee of **$50 per day** will be assessed.

I understand that if my child has special health needs I must call camp to get advance clearance.

For example (but not limited to): Insulin dependent diabetes, cardiac illnesses, severe asthma, seizure disorders, autism, and severe food allergies.

I have read, I understand, and I agree to abide by these policies.

Signature _____ Date _____