



Please attach a photo of camper here (or email as jpg)

# C-A-M-P ENROLLMENT APPLICATION

## CAMPER INFORMATION

Gender: M\_\_ F\_\_

\_\_\_\_\_ Camper First Name \_\_\_\_\_ Camper Last Name \_\_\_\_\_ Date of Birth (Month/Day/Year) \_\_\_\_\_

\_\_\_\_\_ Age \_\_\_\_\_ Grade Completing \_\_\_\_\_ School \_\_\_\_\_ Contact Email \_\_\_\_\_

\_\_\_\_\_ Any Nicknames? \_\_\_\_\_ Any other resident camps attended? \_\_\_\_\_ Which ones? \_\_\_\_\_

## CAMPER'S HOME ADDRESS

\_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_ Home Telephone \_\_\_\_\_ Home Fax \_\_\_\_\_ Camper Email \_\_\_\_\_ Referred to Camp by \_\_\_\_\_

## SIBLING INFORMATION

_____	_____	_____	_____
1. First Name	Last Name	Birth date	Grade
_____	_____	_____	_____
2. First Name	Last Name	Birth date	Grade
_____	_____	_____	_____
3. First Name	Last Name	Birth date	Grade

## PARENT INFORMATION

Sole Parent: Y\_\_ N\_\_

Married: Y\_\_ N\_\_

Child lives with: Mother\_\_ Father\_\_ Other\_\_

\_\_\_\_\_ Mother's Name (last, first) \_\_\_\_\_ Occupation \_\_\_\_\_

\_\_\_\_\_ Business address \_\_\_\_\_ Business Telephone \_\_\_\_\_

\_\_\_\_\_ Mother's Cell Phone \_\_\_\_\_ Mother's Email \_\_\_\_\_

\_\_\_\_\_ Father's Name (last, first) \_\_\_\_\_ Occupation \_\_\_\_\_

\_\_\_\_\_ Business address \_\_\_\_\_ Business Telephone \_\_\_\_\_

\_\_\_\_\_ Father's Cell Phone \_\_\_\_\_ Father's Email \_\_\_\_\_

\_\_\_\_\_ Father's SIGNATURE \_\_\_\_\_ Mother's SIGNATURE \_\_\_\_\_

## PAYMENTS

\$750 with applications, due by Feb 15 in order to reserve a spot. Balance of \$745 by April 15. Make checks payable to "C-A-M-P", or if you prefer, charge deposit and all further payments to: Visa \_\_ MasterCard\_\_

\_\_\_\_\_ Cardholder's Name \_\_\_\_\_

\_\_\_\_\_ Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_

I expressly authorize charging the above noted credit card for all payments due C-A-M-P hereunder.

\_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

PLEASE RETURN COMPLETED APPLICATIONS & CONTRACTS TO:

C-A-M-P  
P.O. Box #484  
Tesuque, NM 87574

*Signature of both parents is required for admission*