



Bobcats Registration Form 2017

Camper's Full Name _____ Nickname _____

Home Address _____ City _____ State _____ Zip _____

Home Telephone _____ Grade entering in Fall 2017 _____

Home E-mail (will be used as primary form of communication as season approaches) _____

Age in July 2017 _____ Date of Birth (M/D/Y) _____ Sex _____ Weight _____ Height _____

Father's Full Name _____

Mother's Full Name _____

Father or Mother's Address (if different than child) _____
City _____ State _____ Zip _____ Home Telephone _____

Father's Preferred Telephone _____ Additional Phone _____

Mother's Preferred Telephone _____ Additional Phone _____

Person To Be Called If Parents Cannot Be Reached _____ Telephone _____

Relationship of Above Person _____

Names and Ages of Siblings _____

BELOW ARE THE SESSION NUMBER(S) AND DATES FOR EACH SESSION THAT YOU ARE REGISTERED.
 SESSION 1 July 1– July 8 (Boys and Girls 8 - 11 years old)
 SESSION 2 July 23– July 30..... (Boys and Girls 8 - 11 years old)

Special Requests
1. Transportation to Roman Catholic Services: Required _____
2. Special diet restrictions: Yes _____ No _____ Brief description _____ Extra fee will be added accordingly

Note: More information on back.

Payment Information

Please make check payable to *The School of Swimming*

\$200 Registration fee enclosed or Total payment of \$_____ enclosed

Tuition:

1. Registered by March 1, 2017: \$1,200 (transportation included)
2. Registered after March 1, 2017: \$1,250 (transportation included)

Choose a Payment Plan:

_____ Two payments- February 1, 2017 and May 1, 2017 (we will send two statements)

_____ One payment due December 1, 2017*** (we will send one statement)

***Full payment received by December 1, 2016 will receive an additional \$50 discount.

Refund Policy:

- *Cancellations received on or prior to Jan. 1, 2017 will receive a full refund.
- *Cancellations received after Jan. 1 and prior to April 1, 2017 will receive a full refund (minus a \$200 cancellation fee).
- *Cancellations received after April 1 and on or prior to June 1, 2017 will receive a full refund (minus a \$250 cancellation fee).
- *Cancellations received after June 1, 2017 will receive a full refund (minus a \$300 cancellation fee).

Photo Release

Camp Eagle Wing will be publishing a camp newsletter, posting pictures on our camp website, and using pictures for camp brochures. Please check and sign below to indicate whether we have permission to use your child's photo for these purposes.

- Yes, I give permission for my child's picture to be used as stated above.
- No, I do not give permission for my child's picture to be used as stated above.

Parent or guardian's signature _____ Date _____

Send in the mail to us:

1. A signed copy of this completed form.
2. \$200 registration fee (refundable until Jan. 1)

If you have any questions please contact us.

Phone— (207) 255-3116 [until September 1] or (860) 563-2804

Email—campoffice@campeaglewing.com