

2012 FAMILY CAMP REGISTRATION FORM

Family Name _____ email _____ Phone (____) _____ Cell (____) _____

Address _____ City _____ State _____ Zip _____

Session I Session II Session III

8/17-20 8/20-24 8/24-26

DEPOSIT (CABIN) \$160 \$200 \$100 _____

DEPOSIT (PLATFORM TENT) \$45 \$60 \$30 _____

The deposit is a separate fee from the per person fees and is required with registration. Cancellations after April 15th will forfeit the per session deposit.

Cabin accommodations vary in size from 2-14 people. We make efforts to place families in appropriate sized cabins. Specific cabin requests cannot be guaranteed although consideration is given to returning families with a completed registration form and deposit on file prior to February 15th. Preference is also given to multi-session families and "special needs".

We wish to share a cabin with the following family: _____ (Deposits can be split between families sharing a cabin if requested)

Cabin location preference: _____

Names of all attendees:

Session I Session II Session III

(For children under age 11, please provide age as of FC attendance)

\$220 (110) \$280 (140) \$130 (65)

(# in parenthesis apply to under 11 over 64)

1. _____ age _____ _____

2. _____ age _____ _____

3. _____ age _____ _____

4. _____ age _____ _____

5. _____ age _____ _____

6. _____ age _____ _____

7. _____ age _____ _____

8. _____ age _____ _____

(Use the back of this form if your party is larger than 8)

ATTENDEE SUB-TOTAL AMOUNT _____

50% of the per person cost is due April 15th. The remaining 50% of the per person cost is due July 15th. There are no refunds for cancellations that occur after July 15, 2012.

Check enclosed for \$ _____ made payable to WYONEGONIC CAMPS

Charge my Visa /Mastercard \$ _____

Credit Card # _____ Expiration _____ Security Code _____

Billing Address & Zip Code _____ Date _____

Signature _____ Name as it appears on card _____

MAIL ALL CORRESPONDENCE TO WYONEGONIC CAMPS, 215 WYONEGONIC RD. DENMARK, ME 04022