

SUMMER 2009 TAPAWINGO REGISTRATION FORM (for girls ages 9 to 17)

Each camper must have a separate registration form. If registering more than one, photocopy this form. See other side for mailing address.

1 CAMPER INFORMATION (Please print legibly)

Last Name _____ First Name _____
 Birthdate / / Age at Camp _____ Grade in Fall 2009 _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____
 School Name _____
 Church Name (optional) _____
 Church Address _____

First time at Tapawingo Renewal
 First year at Tapawingo _____ No. of previous years at Tapawingo _____
 If first time at Tapawingo, who referred you? _____
 Relationship to you (Be specific) _____

If you would like to share a cabin with a **friend of the same age** please indicate friend's name (one name only). _____

NOTE: You must check with your friend's family first, and you MUST BOTH agree before you list her name above.

2 PARENT or GUARDIAN INFORMATION

Last Name _____ First Name _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Work Phone _____
 Cell _____ Email _____
 Relationship to Camper _____

Parents staying at CAMP-of-the-WOODS this summer. Dates _____

BILLING INFORMATION (if different from above)

Last Name _____ First Name _____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Work Phone _____
 Cell _____ Email _____
 Relationship to Camper _____

3 WAIVERS and CONDITIONS of ENROLLMENT

I give permission for my daughter or ward to participate in swimming at sites that are not inspected by a permit-issuing official. With the permit-issuing official's knowledge, qualified Tapawingo staff will determine the suitability of the swimming site. I understand the location of canoe trips, swimming, and hiking may be remote or inaccessible and thus prevent prompt transfer to an emergency medical health care facility.

I give permission for my daughter or ward's picture to be used on the CAMP-of-the-WOODS and Tapawingo website and promotional materials, publications and forms of communication.

All deposits are non-refundable and non-transferable. **No refunds for cancellation less than 4 weeks prior to camper's arrival.**

I have read and hereby agree with the following waivers, conditions, and policies:

Parent/Guardian Signature

4 CAMPING PERIODS (Maximum of four sessions) June 28 – July 4 July 5 – July 11 July 12 – July 18
 July 19 – July 25 July 26 – August 1 August 2 – August 8 August 9 – August 15 August 16 – August 22

Counselor In Training (CIT) program information and application are on our website at: www.camp-of-the-woods.org. Click the "Tapawingo" link.

CIT Sessions: July 5 - July 25 July 26 - August 15

5 DEPOSITS & FEES

The weekly rate of \$495.00 per camper includes meals, lodging, hiking, and most activities, excluding handcrafts & giftshop. A Deposit of \$75.00 per camper per session is due with the Application, plus a \$10.00 Membership Fee for Gospel Volunteers, Inc. The total of \$85.00 must accompany this Application for a one-week session. For multiple sessions multiply the number of sessions x \$75.00 but only pay the \$10.00 Membership Fee once.

Line #	Description	No. of Sessions	Cost Per Session	Total
1	Number of One-Week Sessions (Maximum four sessions)	x	\$495.00	= \$
2	\$75.00 Deposit due per camper, per session	x	\$75.00	= \$
3	Annual Gospel Volunteers, Inc. Membership Fee (Annual charge per camper)			\$ 10.00
4	Total Deposit, plus Annual Membership Fee must accompany Registration Form (add lines 2 & 3)			\$
5	Balance Owed after Paying Deposit [subtract line 2 from line 1]. Balance due 4 weeks prior to arrival.			\$

6 METHOD of PAYMENT

Check Enclosed (payable to CAMP-of-the-WOODS) Full balance must be received at least 4 weeks prior to camper's arrival at Tapawingo.
 MasterCard Visa Discover Card # (Print Legibly) _____ Exp. Date _____
 Zip Code _____ (where you receive your credit card statement)

NOTE: Reservations must be paid in full 4 weeks prior to your camper's arrival at Tapawingo. If paying by credit card, I give permission to charge the balance of the outstanding bill to my credit card listed above 4 weeks prior to my camper's arrival at Tapawingo.

Signature (as name appears on card): _____ Date: _____

IMPORTANT INFORMATION, WAIVERS & CONDITIONS

RESERVATIONS:

- Reservations accepted in **writing** post-marked October 15, 2008 or later.
 - Reservations received between October 16 and November 3 will be processed on November 3, 2008.
 - After November 3, 2008, reservations will be processed in the order they are received.
- One form is to be used per camper. (You may photocopy the registration form.)
- No reservations accepted by **fax** or **email**.
- Weekly reservations accepted by **telephone** after December 1, 2008. **Deposit must be paid by credit card when making telephone reservations.**
- Limit of four (4) sessions per camper.
- Rates are subject to change.
- Vacation Accident Insurance is included in all rates.

DEPOSITS & PAYMENTS:

- Proper deposit amount must be included with registration form. Remaining balance may be paid by credit card or check and may also include the camper's store and crafts account.
- Deposits are non-refundable and non-transferable when cancelling a reservation.
- Reservations must be paid in full four weeks prior to arrival.

CANCELLATIONS:

- All cancellations must be made by telephone and confirmed in writing.
- **If cancellation is made less than four weeks prior to arrival, the full amount is forfeited.**

TRANSPORTATION:

- If you desire a pick-up or drop-off at the Albany Airport, **the fee is \$100.00 per camper, per one-way trip**, subject to fuel surcharge. Call Camp Tapawingo and speak only to the Director to arrange transportation.

GENERAL INFORMATION:

- No email or fax for contacting campers. Fax and email only for business or emergencies.
- Tapawingo is a Christian girls' camp and all rules and regulations are for the safety and welfare of campers. To be effective we need the total support and cooperation of parents and guardians.
- **Camper check-in time is Sunday 1:15 p.m. Camp ends the following Saturday morning between 9:30 a.m. and 10:30 a.m.** Note: no pets allowed on Camp grounds.
- Campers requesting to arrive on Saturday will be charged a \$70 fee subject to availability.
- Additional information will be mailed once reservations are made.

MEMBERSHIPS in Gospel Volunteers, Inc.:

- Everyone staying at Camp Tapawingo must purchase membership (once per calendar year) and adhere to all policies. Memberships are non-transferable.

MAILING & CONTACT INFORMATION

Camp Tapawingo
P.O. Box 250, Route 30
Speculator, NY 12164-0250

Phone: 518-548-5091
Fax: 518-548-9787
Email: tapawingo@camp-of-the-woods.org