

## FAMILY CAMP 2019 REGISTRATION FORM

Please print all information and fill out this form as completely and accurately as possible.

Please fill out a separate form for each weekend that you plan to attend (copies are fine).

A Non Refundable \$50.00 per person deposit must accompany each registration. (no deposit for those under 3 yr. of age)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email \_\_\_\_\_

How did you find out about Anokijig \_\_\_\_\_

WEEKEND: 0Memorial Day (May 2-27, 2019), Labor Day (Aug. 30 -Sept. 2, 2019), Fall Colors (Oct. 11- 13, 2019)

HOUSING PREFERENCE: (First housing assignments will begin during the 3rd week of February. Final housing confirmation by March 1. We will try our best to fulfill your housing preferences but if we cannot do so to your satisfaction we will refund your deposit)

Choice 1 . \_\_\_\_\_

Choice 2 . \_\_\_\_\_

Choice 3 . \_\_\_\_\_

Housing with. \_\_\_\_\_

(if you would like us to try to place you near or in the same housing as another family, let us know here)

Number of Campers By Age.

3 & Under \_\_\_\_\_ 4-12 \_\_\_\_\_ 13 & up \_\_\_\_\_

Number Vegetarian \_\_\_\_\_ Gluten Free \_\_\_\_\_

For other dietary requests please contact camp office 4 weeks prior to your stay.

| Housing Choices: |                   |
|------------------|-------------------|
| Cabins.          |                   |
| Lakeview         | Voigt Lodge       |
| Eastman Lodge    | Health Lodge      |
| Thunderbird      | Crow's Nest       |
| Mevers . Lodge   | Stone Road Lodges |
| Tents:           |                   |
| Rippling Ridge   | Hickorv Hillcrest |
| Kingdom of Moo   | Timberline        |
| Turtle Island    | Brave Village     |

TOTAL: Amount Due: \_\_\_\_\_ Deposit \_\_\_\_\_ Balance Due: \_\_\_\_\_

Check No: \_\_\_\_\_ (or) Credit Card: (Circle one)      Visa      Master Card      Discover      American Express

CC#: \_\_\_\_\_

Exp Date: \_\_\_\_\_ V-Code. \_\_\_\_\_ (last 3-4 digits in signature line)

Name on Card \_\_\_\_\_ Signature. \_\_\_\_\_

APPLICANTS PARTICIPATION WAIVER

As the family/party representative registering for this program I will insure that I and my family members/party members understand that:

Friends of Camp Anokijig (FOCA) and Camp Anokijig do not cover guests health and medical expenses. Healthcare expenses are the responsibility of each camper/guest and his/her insurance carrier.

By participating in camp programs, permission is granted for FOCA and Camp Anokijig to use photos, videos, voice recordings, and images taken of guests for purposes which the FOCA and Camp Anokijig may deem appropriate.

FOCA, its officers, directors, agents, board members, and employees, and Camp Anokijig, its directors, employees, members, staff, and volunteers are not responsible for lost, damaged, or stolen articles.

State Codes require Anokijig to maintain a guest list with addresses and contact information. Names, address, phone, & e-mail of all guests will be provided at the time of arrival or earlier.

Behavioral Supervision of minors is the sole responsibility of parents/party leaders.

Family/party will be responsible to reimburse Camp Anokijig for any damages (losses) or alterations, malicious or otherwise, caused by the party's members or their guests and also understands that material and/or labor will be figured at current market "full replacement costs".

I and the members of my family/party will be required to abide by all of the "Camp Anokijig Regulations & Safety Rules"

(copies of policy available upon request).

By participating in this program it will be assumed that I and my family members/party members waive any claims against, indemnify, and hold harmless FOCA, its officers, directors, agents, board members, and employees, Camp Anokijig, its directors, employees, members, staff and volunteers for injuries, damages, or losses that may result from occurrences on the property of Camp Anokijig, as well as the conduct of other persons including participants in the Camp Anokijig programs, FOCA, Camp Anokijig, its board members, directors, officers, agents, employees, staff, and volunteers.

APPLICANTS SIGNATURE: \_\_\_\_\_ PRINTED NAME \_\_\_\_\_ DATE \_\_\_\_\_