

**REFER A FRIEND AND YOU EACH GET \$50 OFF CAMP**

**We want to thank you for telling others about Camp Kanuga.**

For each new camper who registers for Camp Kanuga in 2010 and lists your name in "How Did You Hear About Camp Kanuga" section on the back of this page, **we will give you and the new camper \$50 off the total cost of camp.**

*Discounts apply to new campers only and may not be applied to registrations received prior to April 1, 2010. Limit five \$50 referral incentives per family, a possible savings of \$250. Cancellations will not receive discounts.*

# Camp Kanuga



Post Office Box 250  
Hendersonville, NC 28793  
Phone: 828-692-9136  
Fax: 828-696-3589  
campkanuga@kanuga.org • www.campkanuga.org

## 2010 REGISTRATION FORM

### CAMP KANUGA

Ages 8-15 (Age 7 for Sessions 1 and 5 only)

- Session 1                  June 5-14                  \$875
- Session 2                  June 16-29                \$1265
- Session 3                  July 1-14                 \$1265
- Session 4                  July 17-30                \$1265
- Session 5                  Aug. 1-10                 \$875

**If attending two sessions**, check here if your child will stay at camp between sessions. There is a \$100 fee per child per stayover. **Space is limited to the first 12 campers who register for stayovers.**  
*No stayovers are allowed between sessions 3 and 4.*

Please indicate your second session preference \_\_\_\_\_

### TRAILBLAZER ADVENTURES

Ages 15-16. **Upon receipt of completed registration form, all applicants must complete written and phone interviews to be accepted to the program.**

- Session A                  June 16-29                \$1375
- Session B                  July 1-14                 \$1375
- Session C                  July 17-30                \$1375
- Pack & Paddle A            June 16-29                \$1650
- Pack & Paddle B            July 1-14                 \$1650

### CAMPER INFORMATION

Camper Name \_\_\_\_\_ Gender: M  F

Preferred Name \_\_\_\_\_ Camper's Email \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade completed June 2010 \_\_\_\_\_ Church \_\_\_\_\_

Previous years at Camp Kanuga \_\_\_\_\_ T-shirt size: Youth M  Youth L  Adult S  Adult M  Adult L  Adult XL

### PARENT/FAMILY INFORMATION *(Please list an email you check regularly. This will be used for important camp reminders.)*

Mother's Name \_\_\_\_\_ Occupation \_\_\_\_\_

Address (if different) \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Father's Name \_\_\_\_\_ Occupation \_\_\_\_\_

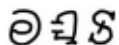
Address (if different) \_\_\_\_\_

Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

Cell Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Parents are: Married  Separated  Divorced  Camper lives with \_\_\_\_\_

**ATTENTION PARENTS: Please circle the daytime (9-5, M-F) phone number you prefer to be reached at for camp-related issues.**



FORM CONTINUES ON REVERSE. BOTH PAGES ARE REQUIRED.

OVER →

## SPECIAL INFORMATION

Please indicate any special situations that might affect your child's experience at Camp Kanuga, billing or sharing of camper information (e.g. divorce or separation, new locations, school, death or illness in family) \_\_\_\_\_

## CABIN PLACEMENT

Camp Kanuga reserves the right to place each camper in the cabin we feel is best. While careful consideration is given to each cabinmate request, the final decision rests with the director. **Campers may request no more than two people. Cabinmate requests must be made in writing and must be mutual (both campers request each other) to be considered.** This option does not apply to Trailblazers.

Cabinmate request \_\_\_\_\_

## HOW DID YOU HEAR ABOUT CAMP KANUGA?

My church    At Kanuga    campkanuga.org or kanuga.org    Kanuga catalog/brochure

Referred by a camper \_\_\_\_\_  
*Please writer camper name, session number and parent name to qualify for \$50 referral incentive.*

Other \_\_\_\_\_

## PAYMENT INFORMATION

▷ **A nonrefundable \$200 deposit per camper per session must be submitted at the time of registration;** the deposit is deducted from the total fee.

▷ **If paying with a credit card, the card holder must call Kanuga to authorize further payments.**

▷ To make payments with a credit card, you may contact Camp Kanuga anytime at least two months prior to the beginning of your child's session.

▷ To register less than two months before the session begins, please pay the full amount.

▷ Make checks payable to Kanuga Conferences, Inc.

▷ When sending payments, please include the camper's name and session number.

▷ For details on financial aid, sibling discounts and cancellations/refunds, visit [www.campkanuga.org](http://www.campkanuga.org).

▷ **Final payment and camper health forms are due two months prior to the beginning of your child's camp session.**

Amount Enclosed:  \$200    Other \_\_\_\_\_

Payment Method:  Check    MasterCard    VISA

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ / \_\_\_\_\_

Security Code (last 3 digits on back of card) \_\_\_\_\_  
**REQUIRED**

Name on card \_\_\_\_\_

Signature \_\_\_\_\_

**PAYER CONTACT INFORMATION** *(if different from parent)*  
**This information is REQUIRED and will be used to send important camp reminders.**

Address \_\_\_\_\_

Email \_\_\_\_\_

Phone(\_\_\_\_\_) \_\_\_\_\_

## PARENT AUTHORIZATION

I hereby make application for enrollment of my child in Camp Kanuga. I give permission for photographs, video footage and audio recordings of my child to be used by the camp for promotional purposes. I agree to support the camp directors in regard to my child's cabin assignment. I understand that there is a certain degree of risk and possibly injury inherent in camp, and I give permission for my child to participate in the camp's activities. I hereby give permission to the physician selected by the camp director to provide medical care for my child in the event of an emergency.

Parent signature \_\_\_\_\_ Date \_\_\_\_\_