



Our mission is to empower children by providing a safe place for growth and enrichment in the great outdoors and a respect for the environment

Date of application: _____

Camper Information (Please complete one form for each camper):

First Name: _____ Last Name: _____ Age: _____ Gender: _____

Date of Birth: _____ Grade just completed: _____ Ethnicity _____ County: _____

Address: _____ City: _____ State: _____ Zip: _____

Last School Attended: _____ Lunch Program: Full ___ Reduced ___ Free ___

Have you attended Camp Alexander before? Yes ___ No ___

Primary Contact:

First Name: _____ Last Name: _____ Relationship to Camper: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Best number to use to contact during camp time: _____

Secondary Contact:

First Name: _____ Last Name: _____ Relationship to Camper: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Occupation: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Best number to use to contact during camp time: _____

Emergency Contact Information: (Please specify an emergency contact other than those listed above.)

First Name: _____ Last Name: _____ Relationship to Camper: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Others allowed to pickup camper (Only those listed on this form will be allowed to pick up camper. If you wish to add someone to this list, please notify camp ahead of pickup time):

Name(s): _____

Relationship to Camper: _____ Phone: _____

Name(s): _____

Relationship to Camper: _____ Phone: _____

Rates:

Early Bird Special (Before May 1, 2018): \$90.00 per week

Regular Enrollment: \$120.00 per week

\$50.00 per week for ages 12-14 to participate in the Youth Leadership Program. There is no early Bird Discount for this week. NOTE: This is subject to approval of LIT application.

Multi Child Discount: \$10.00 discount for each child after first child in a family pays in full when registering for the same week of camp

Please choose which weeks you would like for your child to attend camp from the list below:

- | | |
|-----------------|--|
| _____ 5/29-6/1 | Mr. Alexander's Summer Classics (no camp on May 28 th) |
| _____ 6/4-6/8 | Sports Mania |
| _____ 6/11-6/15 | Water Wars |
| _____ 6/18-6/22 | Fit-Tastic |
| _____ 6/25-6/29 | Nature Adventure (Our annual summer fish fry will be on Friday this week!) |
| _____ 7/2-7/6 | MidSummer Mayhem (No camp July 4th) |
| _____ 7/9-7/13 | Teamwork Makes the Dreamwork |
| _____ 7/16-7/20 | Tidal Wave |
| _____ 7/23-7/27 | Sports Mania Round 2 |
| _____ 7/30-8/3 | Summer Highlights |

Payment Information

Camper Name _____ Parent/Guardian Name _____

Type of payment:

Cash _____ Check _____ Credit Card _____

Name on Credit Card _____

Credit Card Type _____ Credit Card Number _____

Expiration Date _____ Security Number (back of card) _____

Amount paid: _____ (All payments must be made no later than 5:30 pm on Monday of each week. See policy handbook for information regarding late penalties.)

Return check fee will be \$30.00.

Before May 25th, 2018, payments may be made by mail or at Non-Profit Solutions 618 Commercial St., Emporia, KS.

After May 29th, 2018, payments may be made by mail or at the Camp Alexander office, 1783 Road P5, Emporia, KS.

Camp fees include: All camp materials, breakfast, lunch and a snack.

Revised 2-19-18

