



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 _____

Health concerns: Yes _____ No _____ if yes please explain _____

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, 2016): \$90.00 per week

Regular Enrollment: \$120.00 per week

\$50.00 per week for ages 13-14 to participate in the Youth Leadership Program if registered before May 1st (Early Bird Special) NOTE: This is subject to approval of LIT application.

\$75.00 per week for ages 13-14 to participate in the Youth Leadership Program if registered May 1st or later

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:

_____ 5/28 - 5/31 Mr. Alexander's Summer Classics

_____ 6/3 – 6/7 Olympic Games

_____ 6/10 - 6/14 Water Wars

_____ 6/17 - 6/21 Moovin' and Groovin'

_____ 6/24 - 6/28 Nature Adventure

_____ 7/1 - 7/5 (No camp on July 4th) Mid Summer Mayhem

_____ 7/9 - 7/12 Teamwork Makes Dreamwork

_____ 7/15 - 7/19 Tidal Wave

_____ 7/22 - 7/26 Sports Mania

_____ 7/29 - 8/2 (last week of camp) Summer Highlights

Discipline

If a camper is not following camp guidelines and is not being respectful, responsible or safe, they will be given a strike. If a strike is given, the parent/guardian will be notified of the incident. If the camper is not following guidelines for a second time they will be given a second strike. If strike 2 is given, the parent/guardian will be called and they will be asked to pick up their camper for the rest of the day. If the camper returns the following day and is not following camp guidelines for the third time they will be given a third strike. The third strike means the camper will need to be picked up immediately and will not be allowed to return to camp for the rest of the summer.

However, it is at the full discretion of the camp director to remove a camper from camp and not allow the camper to return regardless of the 3 strike rule above if they see need to ensure safety for campers and staff. If a camper is removed from camp for disciplinary reasons, the camper will not receive a refund or partial refund of any kind.

Signature: _____ date: _____

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 June 1, 2019, payments may be made by mail or at Non-Profit Solutions 618 Commercial St., Emporia, KS.

After June 1, 2019, payments may be made by mail or at the Camp Alexander office, 1783 Road P5, Emporia, KS.

Camp fees include: breakfast, lunch and a snack.