

# Adventure Bound at Camp West Woods

# APPLICATION 2012

808 West Street Stoughton, MA 02072

www.campwestwoods.com

Tel: 781-341-4424 Fax: 781-341-2970 Email: campwestwoods@verizon.net

Enrollment for Adventure Bound begins on November 7<sup>th</sup>.  
No applications will be accepted before November 7<sup>th</sup>.

Name of Camper \_\_\_\_\_ Age \_\_\_\_ Birth date \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex \_\_\_\_\_

Grade starting in September 2012 \_\_\_\_\_ School Name \_\_\_\_\_

Home Address \_\_\_\_\_ Town \_\_\_\_\_ Zip \_\_\_\_\_

1<sup>st</sup> Parent's name \_\_\_\_\_ 2<sup>nd</sup> Parent's name \_\_\_\_\_

1<sup>st</sup> Parent's home phone \_\_\_\_\_ 2<sup>nd</sup> Parent's home phone \_\_\_\_\_

1<sup>st</sup> Parent's work phone \_\_\_\_\_ 2<sup>nd</sup> Parent's work phone \_\_\_\_\_

1<sup>st</sup> Parent's cell phone \_\_\_\_\_ 2<sup>nd</sup> Parent's cell phone \_\_\_\_\_

Primary email address \_\_\_\_\_

Please place my child with \_\_\_\_\_

My child needs extra attention at camp \_\_\_\_ No \_\_\_\_ Yes. If yes, please attach a note of explanation.

**Please check each session desired:**

<p><b><u>Trailblazers (Entering Grade 3 or 4)</u></b></p> <p>____ Trailblazers 1 (July 9-13) \$425</p> <p>____ Trailblazers 2 (July 30-August 3) \$425</p> <p><b><u>Adventurers (Entering Grade 7 or 8)</u></b></p> <p>____ Adventurers 1 (July 9-20) \$1,050</p> <p>____ Adventurers 2 (July 23-August 3) \$1,100</p> <p>____ Adventurers 3 (August 6-17) \$1,050</p>	<p><b><u>Bounders (Entering Grade 5 or 6)</u></b></p> <p>____ Bounders 1 (July 2-13) (no program on July 4) \$900</p> <p>____ Bounders 2 (July 16-27) \$950</p> <p>____ Bounders 3 (July 30-August 10) \$975</p> <p><b><u>Xtreme Travel Camp (Entering Grade 9, 10, or 11)</u></b></p> <p>____ Xtreme 1 (July 9-20) \$1,250</p> <p>____ Xtreme 2 (July 23-August 3) \$1,250</p>
---	--

**Extended Day:** 7:30-9:00 AM \_\_\_\_ Mon. \_\_\_\_ Tues. \_\_\_\_ Wed. \_\_\_\_ Thurs. \_\_\_\_ Fri.  
 4:00-6:00 PM \_\_\_\_ Mon. \_\_\_\_ Tues. \_\_\_\_ Wed. \_\_\_\_ Thurs. \_\_\_\_ Fri.

**Transportation to Camp:** \_\_\_\_ Please put my name and phone number on the carpool list.

**Fees:** Tuition: See box above. Registration fee: \$40.

Extended Day Program: \$8/day for AM, \$10/day for PM, \$15/day for AM & PM

**Payment Methods:** A non-refundable deposit of \$350 (\$310 of which is credited toward tuition) along with the health form must accompany each application. A \$40 registration fee is included in the non-refundable deposit. For families with more than one camper, the registration fee is \$65 per family. **Total amount due must be paid in full by March 1<sup>st</sup>.**

\_\_\_\_ Check enclosed (payable to Camp West Woods) OR

\_\_\_\_ Charge my \_\_\_\_ Mastercard \_\_\_\_ Visa \_\_\_\_\_  
Card number

\_\_\_\_ Exp. Date \_\_\_\_ CVV2# (last 3 digits on back of card) \_\_\_\_\_ Signature \_\_\_\_\_

Amount to be charged to my credit card: \_\_\_\_ Deposit Only \_\_\_\_ Total (tuition and registration fee)

**CONTINUED ON REVERSE SIDE**

**SIGNATURE REQUIRED**

**PLEASE READ CAREFULLY AND SIGN BELOW**

I understand and agree to the following:

- I have thoroughly discussed the program(s) for which I have enrolled my daughter/son and we both understand that the Adventure Bound program requires its participants to be in reasonably good physical condition, have the basic skills to safely participate in all the activities of the session, have the social and emotional maturity to be a positive group member, be an eager participant, and have the ability to spend nights away from home camping.
- The Director of the camp reserves the right to dismiss any camper, without refund, who in the Director's judgement violates the camp's rules. These rules will be sent out in the confirmation packet after your application has been processed.
- **A full refund of payment for tuition will be given only if cancellation of weeks is done before February 1st. If cancellation of weeks occurs between February 1st and March 1st, a \$100 change fee will be charged to your account. After March 1st, no refunds are given for any dropped sessions or absences during camp, nor can the payment be applied to another session. The registration fee is non-refundable.**
- All fees are to be paid on or before **March 1<sup>st</sup>** unless otherwise agreed upon in writing by the camp.
- I understand the camp does not refund money for any camper who withdraws for any reason, including but not limited to: illness, injury, missed days, violation of camp rules, or change of plans.
- If my child needs any extra assistance at camp, has any special needs, or in anyway may be unable to fully participate in all activities, I have shared all relevant information with the Camp Director prior to sending in this application.
- I give the camp permission to publish photos of my child (no names mentioned) in brochures, on the website, and in public relations presentations.
- I authorize the staff of the Adventure Bound Program to deal with any emergency that may arise during any camp activity. In the event that I cannot be reached in an emergency, I hereby authorize the physician selected by the camp director to hospitalize and/or secure treatment for my child.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**GENERAL RELEASE AND ASSUMPTION OF RISK**

I understand that the activities my daughter/son will engage in involve risk to her/him including the possibility of injury or death. I have read the program description and fully understand these activities and the risks associated them including the risks and dangers of van transportation. I certify that she/he is physically fit and represent that she/he is in sound medical condition capable of participating in this program without risk to others or her/himself. In consideration of my child's participation in these activities, I agree to release, defend and hold harmless Camp West Woods Inc. (DBA Adventure Bound Program), its officers, directors, and employees, from liabilities on account of injury to my child's body, health, well-being or property, or for any other loss, claim or damage without limitation.

Signed \_\_\_\_\_ Date \_\_\_\_\_

This camp complies with regulations of the Massachusetts Department of Public Health (105 CMR 430) and is licensed by the Stoughton Board of Health. Information on these regulations can be obtained at 617-983-6761.

**To enroll for camp, you need to submit this Application, Payment, and the Health Form to:**

**Adventure Bound at Camp West Woods  
808 West Street  
Stoughton, MA 02072**

***Your child's enrollment will not be processed if any of these three items are missing.***