



2008 - 2009 Attendance Application Grades 1 - 6 (Pioneer/Rustler/Trailblazer)

PO Box 407
Pelham, GA 31779
Phone: (229) 294-2294
Web: campcharis.org
Email: campcharis@bellsouth.net

Pioneer/Rustler/ Trailblazer

- ◆ Application should be printed clearly in black ink by an ADULT. Application may be used for up to four sessions for the same camper. Use ONLY ONE SIDE. Notarization is NOT required. Additional applications may be copied or down loaded at campcharis.org.
- ◆ Contact Camp Charis if you need Staff, or Cadet/SALT applications.
- ◆ NEW! NEW! Placement for all activities August 15, 2008 to August 14, 2009 is based on camper's grade as of September 1, 2008. Groups are grades 1&2, 3&4, 5&6. Consideration for placement in a different age group is given upon request through the Camper Information Form. Exceptions are not automatic and must be requested at time of initial participation for the school year.
- ◆ Camper Information Forms are required prior to attendance and are good for the entire season. Forms available at campcharis.org
- ◆ Limited financial assistance is available. Requests may be made through the Camper Information Form.

CAMPER INFORMATION:

First Name _____ Last Name _____ Name For Nametags _____
Gender _____ Date of Birth ____/____/____ Grade as of Sept 1, 2008 _____ E-Mail _____

PARENT INFORMATION:

First Name _____ Last Name _____ Relationship To Camper _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Work Phone _____
Spouse First Name _____ Last Name _____ Relationship To Camper _____
Email Address to Receive Confirmations/Notifications: _____

ATTENDANCE INFORMATION: Session numbers and dates. Clearly mark desired sessions.

Overnight Camp 3-day sessions: Drop-off is 7-8pm Friday. Pick-up is 1-2pm Sunday.

F1 ____ Oct 24-26, 2008 S1 ____ Mar 27-29, 2009

Day Camp 5-day sessions: Drop-off is 7:45-8:45am, Monday-Friday. Pick-up is 4:45-5:45pm, Monday-Friday.

D1 ____ Jun 15-19, 2009 D3 ____ Jun 29-Jul 3, 2009 D5 ____ Jul 20-24, 2009
D2 ____ Jun 22-26, 2009 D4 ____ Jul 13-17, 2009 D6 ____ Jul 27-31, 2009

Overnight Camp 6-day sessions: Drop-off is 4-6pm Sunday. Pick-up is 4-6pm Friday.

O1 ____ Jun 14-19, 2009 O3 ____ Jun 28-Jul 3, 2009 O5 ____ Jul 19-24, 2009
O2 ____ Jun 21-26, 2009 O4 ____ Jul 12-17, 2009 O6 ____ Jul 26-31, 2009

PAYMENT INFORMATION:

Overnight Camp 3-day sessions costs: \$50 or \$40 if paid in full by early date of: Sept. 24, 2008, Feb. 26, 2009.

Day Camp 5-day sessions costs: \$100 or \$80 if paid in full by early date of: May 7, 2009.

Overnight Camp 6-day sessions: \$225 or \$200 if paid in full by early date of: May 7, 2009.

*Send \$50 deposit or full payment per session. Balance due 30 days prior to event.
Refunds: 50% if requested in writing at least 30 days prior to event. Transfers are not allowed.*

1st Session _____	2nd Session _____	3rd Session _____	4th Session _____
Cost _____	Cost _____	Cost _____	Cost _____
Amt Encl _____	Amt Encl _____	Amt Encl _____	Amt Encl _____
Amt Due _____	Amt Due _____	Amt Due _____	Amt Due _____

Total Amount Enclosed _____ Check # _____ Name on Check _____ Date _____



2008 - 2009 Attendance Application Grades 7 - 12 (Cadet/SALT)

PO Box 407
Pelham, GA 31779
Phone: (229) 294-2294
Web: campcharis.org
Email: campcharis@bellsouth.net

Cadet/SALT

- ◆ **Application should be printed clearly in black ink by an ADULT. Application may be used for up to four sessions for the same camper. Use ONLY ONE SIDE.** Notarization is NOT required. Additional applications may be copied or down loaded at campcharis.org.
- ◆ Contact Camp Charis if you need Staff or Pioneer/Rustler/Trailblazer applications.
- ◆ **NEW! NEW!** Placement for all activities August 15, 2008 to August 14, 2009 is based on camper's grade as of **September 1, 2008**. Groups are grades 7-8 and 9-12. Consideration for placement in a different age group is given upon request through the Camper Information Form. Exceptions are not automatic and must be requested at time of initial participation for the school year.
- ◆ Camper Information Forms are required prior to attendance and are good for the entire season. Forms available at campcharis.org
- ◆ No financial assistance is available for campers in grades 7-12.

CAMPER INFORMATION:

First Name _____ Last Name _____ Name For Nametags _____
Gender _____ Date of Birth ____/____/____ Grade as of Sept 1, 2008 _____ E-Mail _____

PARENT INFORMATION:

First Name _____ Last Name _____ Relationship To Camper _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Work Phone _____
Spouse First Name _____ Last Name _____ Relationship To Camper _____
Email Address to Receive Confirmations/Notifications: _____

ATTENDANCE INFORMATION: Session numbers and dates. **Clearly mark desired sessions.**

Overnight Camp 3-day sessions: CADETS and SALT. Drop-off is 7-8pm Friday. Pick-up is 1-2pm Sunday.

FT1 ____ Nov 21-23, 2008 ST1 ____ Feb 20-22, 2009 ST2 ____ Apr 17-19, 2009

Cadet Orientation: CADETS ONLY. Drop-off is 7-8pm Friday. Pick-up is 1-2pm Sunday.

CO ____ May 29-31, 2009

SALT Training: SALT ONLY. Drop-off is 4-6pm Sunday. Pick-up is 4-6pm Friday.

TR ____ Jun 6-12, 2009

Overnight Camp 6-day sessions: CADETS ONLY. Drop-off is 4-6pm Sunday. Pick-up is 4-6pm Friday. SALT sign up separately.

O1 ____ Jun 14-19, 2009 O3 ____ Jun 28-Jul 3, 2009 O5 ____ Jul 19-24, 2009
O2 ____ Jun 21-26, 2009 O4 ____ Jul 12-17, 2009 O6 ____ Jul 26-31, 2009

PAYMENT INFORMATION:

Overnight Camp 3-day sessions costs: \$40 or \$30 if paid in full by early date of: **Oct 24, 2008, Jan 22, 2009, Mar 19, 2009.**

Overnight Cadet Orientation: \$40 or \$30 if paid in full by early date of: **April 30, 2009.**

Overnight SALT Training: \$200 or \$150 if paid in full by early date of: **April 30, 2009.**

Overnight Camp Cadet 6-day sessions: \$100 or \$75 if paid in full by early date of: **May 7, 2009.**

Send \$50 deposit or full payment per session. Balance due 30 days prior to event.

Refunds: 50% if requested in writing at least 30 days prior to event. Transfers are not allowed.

1st Session _____	2nd Session _____	3rd Session _____	4th Session _____
Cost _____	Cost _____	Cost _____	Cost _____
Amt Encl _____	Amt Encl _____	Amt Encl _____	Amt Encl _____
Amt Due _____	Amt Due _____	Amt Due _____	Amt Due _____

Total Amount Enclosed _____ **Check #** _____ **Name on Check** _____ **Date** _____