



2020 OVERNIGHT CAMPS SUMMER CAMP REGISTRATION

Please return completed form to:
Akron Rotary Camp
4460 Rex Lake Drive
Akron, OH 44319
330-644-1013 (Fax)
rotarycamp@akronymca.org (email)

Questions? Comments?
Please contact us at:
330-644-4512
gotcamp.org

2020 ROTARY CAMP DATES AND RATES

Overnight Children's Camps (Sunday-Friday)

- July 5 - 10 July 12 - 17 June 19 - 24
 July 26 - 31 August 2 - 7

No. of Weeks _____ x 685 = \$ _____ - \$50 Deposit/Co-Pay*(per session) = \$ _____

Every week is Siblings Week!

The siblings of our campers with special needs can choose the week(s) that work best for the family.

Please review registration carefully before submitting **Camp Total = \$ _____**

Please note that campers can attend 3 weeks of camp, but it cannot be consecutive weeks.

Please visit us online for more information regarding our camp, support groups and other programs. Connect with us on Facebook!

The following information is for statistical purposes only. It is used in reports to foundations and other funding organizations. Please help us keep our camp costs low by providing the following information.

What is the total number of persons in your household?

What is your total household income?

Please specify Camper's race:

- White/Caucasian Black/African American
 Hispanic/Latino Asian/Pacific Islander
 Native American Indian Other

Unless billing to an authorized third party, all incomplete registration forms and those without deposits will be returned. If you need to make arrangements on deposits, please call 330.644.4512 before mailing.

Camper's Name

Home Address

City State Zip County

Telephone Email

DOB Male Female

Sibling of Camper? Yes No

Camper's Primary Diagnosis

Allergies

Parent / Guardian's Name

Parent / Guardian's DOB

Primary Phone Business/Cell Phone

Email

In case of emergency, please provide two additional contacts and telephone numbers who could pick up your camper:

Name Phone Relationship to Camper

Name Phone Relationship to Camper

Is Camper DD Board Qualified? Yes No

If so, what county?



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Camper's Name _____

PAYMENT INFO

Total Amount:

PERSONAL CHECK

(Include with Registration)

AGENCY

Billing Agency Name

Contact Person

Phone

Address

Total Amount to be Billed

CREDIT CARD*

AUTOMATIC CHECKING DRAFT*

***Once the registration packet is received, you will be contacted to collect your form of payment.**

FINANCIAL & CANCELLATION POLICIES

- Campers with outstanding balances will not be permitted to enroll in upcoming program sessions.

- Deposits are due at the time of registration. If paying through a third party, it is the parent's / caregiver's responsibility to ensure that a written agreement between Rotary Camp and the third party is on file.

- Financial assistance and payment plans are available to qualifying campers and families based on income and/or need. Paperwork must be submitted annually for consideration.

- For summer camp programs, all balances are due in full 2 weeks prior to the camper's session. Campers who do not have financial arrangements made by then, may be taken off the roster for their assigned programs. Arrangements can be made by calling 330.644.4512

- Cancellations made prior to the session date are eligible for a refund less the deposit.

- No-Show/No-Call: The family must call camp a minimum of one hour before check-in to cancel or the family will be billed 1/2 the session fee and may be taken off the roster for future sessions.

- Late pick-up: The family will be billed \$25.00 for every 15 minutes per camper.

- Due to the generosity of our community, Rotary Camp programs are subsidized through many individual and corporate donations. We are unable to offer refunds for campers who attend a partial or entire camp session. This includes campers sent home for illness and behavioral needs.

This must be signed and dated before camper's registration is complete

Signature

Date



2020 OVERNIGHT CAMPS

SUMMER CAMP REGISTRATION

Camper's Name _____

AUTHORIZED PICK UP

The following person/s are authorized to pick up my camper/s from Akron Rotary Camp. **Valid ID may be requested.**

1.

Name

Phone Number

Relationship to Camper

2.

Name

Phone Number

Relationship to Camper

3.

Name

Phone Number

Relationship to Camper

I understand that Akron Rotary Camp will only release my camper/s to the authorized persons listed above, in addition to myself.

Name

Relationship to Camper

Signature

Date