

2009 CAMP GOLD HOLLOW REGISTRATION



Mail registration to: Camp Gold Hollow, 401 Amador Street, Vallejo, CA 94590 (707) 643-4573 or FAX (707) 643-4574

Camper Name _____ Birthdate _____ Age at camp _____ M F
 Home Address _____ Grade in Fall _____
 City _____ Zip _____ Home Phone # _____
 Primary Contact _____ Relationship _____
 Address _____ Day/Cell/Work Phone _____
 City _____ Zip _____ Day/Cell/Work Phone _____
 Email _____
 Secondary Contact _____ Day/Cell/Work Phone _____

SESSION DATE:

Early Bird Discount

July 26-Aug 1, 2009 \$525 \$450 CIT \$400 Request Vegetarian Meals

- Registration must be accompanied by a \$50 nonrefundable deposit for each child. Fees will be returned only if camp is cancelled or if the session is full. In the event of illness preventing camp attendance, a prompt letter of explanation must be sent to the Camp Fire office. No other refunds will be considered for cancellations of less than 14 days prior to the camp session. Refunds will not be given for early departure from camp due to behavioral or personal reasons. Half the payment will be prorated for early departure due to illness or injury.
- Camp fees must be paid in full 2 weeks prior to camp session or we reserve the right to cancel your registration.
- "EARLY BIRD DISCOUNT" \$75. To receive discount, **ALL** camp fees must be paid in full by **May 15, 2009**.
- 2nd child discount, \$50 for each 2nd, 3rd....etc child from same family.
- Register with a friend who has never been to Camp before and each earns \$25 discount off camp fees.

BUS PREFERENCE:

HOW DID YOU FIND OUT ABOUT CAMP?

To Camp: Vallejo No Bus School Flyer Went last year Friend
 From Camp: Vallejo No Bus Newspaper Internet Other _____

BUNK MATE REQUEST: _____ ONE NAME ONLY PLEASE

Campers are grouped by age and sex within a one-year or one grade spread. We encourage parents to separate siblings.

ALLERGIES: _____

Campers with Bee allergies must have their own Bee Sting kit

MEDICATIONS: _____

A complete medical form will be mailed to you after registration

I hereby apply for admission for my child to attend Camp Gold Hollow and represent and agree to the following:

- I have read and understood the camp Refund Policy.
- My child will observe rules as shall be made by Camp Fire USA or Camp Gold Hollow, as outlined in the Parent's Packet.
- I hereby release and discharge the Council, its officers, directors, agents and employees from any and all liability respecting claims that I may have by reason of accident, sickness or injury to my child or to his personal possessions while at camp or going to and from camp.
- I hereby authorize the camp staff or those appointed to engage for my child, at my expense any necessary emergency medical or dental care pursuant to the provisions of the Medicine Practice Act or Dental Practice Act. Provided in Section 25.8 of the Civil Code of California.
- I hereby authorize the camp staff or those appointed to provide routine health care for my child and administer his prescribed medications. Camp staff or those appointed **MAY/MAYNOT** (circle one) administer over-the-counter medications such as analgesics, cough syrup, and topical ointments.
- I hereby certify that I have read the Registration Packet. My child is attending Camp Gold Hollow with my full knowledge and permission; and I have legal custody to grant such permission. My child may participate in all phases of the camp programs, which may include lake swimming, canoeing, archery, hiking, and cookouts.
- I am aware that Camp Gold Hollow is located in the habitat area of Rattle Snakes, Mountain Lions and Bears which occasionally make their appearance in the camp.

PHOTO RELEASE: Camp Gold Hollow respects the privacy of its campers and does not allow unauthorized visitors to photograph the camp or campers. On occasion, with this permission, we may photograph children for promotional materials by the Camp Fire Council of the Golden Empire for use in brochures, newsletters, camp album, web site or fund raising activities.

PERMISSION TO TRAVEL BY BUS: On occasion, campers may be taken by bus or private vehicle for out-of-camp events such as to the Yuba River, community pool, Nevada County Fairgrounds or special events sponsored by other camps. I give my permission for my child to travel out of camp for these events.

_____ Date

_____ Signature of Parent of Legal Guardian