

2010 Winter Camp Application

Summer 2010 campers: Please fill this application in completely – leaving no spaces blank. If you did **NOT** attend one of our 2010 summer sessions **STOP!!** You will have to call the office and ask for a full application with a Health form.

Please remember that there will be no financial assistance available for Winter camp or respite services. The fee for Winter camp 2010 will be \$500. Our respite services will be \$150 per day or \$15 per hour whichever is less. The cost for one to one campers for Winter camp will be \$650.

If you have any questions or concerns please don't hesitate to contact me, I will be leaving my contact info below. Our winter camp sessions have been popular in the past so please remember to sign up in a timely manner – as there are limited spaces available. I look forward to seeing some of you this Holiday season!!!

Carissa Moen – Camp registrar

E-mail: assiracneom@hotmail.com

Phone # (863) 696-1948 ext.12

Camper Name: _____

Male____ **Female**____ **Date of birth:**_____

Guardian Name: _____

Camper Address: _____

Telephone #'s (home) _____

(other) _____

Wheelchair? **Yes**____ **No**____

Behaviors? **Yes**____ **No**____

One to one? **Yes**____ **No**____

Please list any allergies: _____

Are there any significant medication or medical changes since summer 2010: _____

Please list any concerns or issues that you may have:

Please choose which Winter camp session you would like your camper to attend:

Session #1 - 11/29/10 – 12/3/10 _____

Or

Session #2 - 12/6/10 – 12/10/10_____

Both of our Winter camp sessions will begin on Monday mornings with check in starting @ 10:00 a.m.

Check out will be on Friday @ 2:00 p.m.

We will be doing outings during Winter camp – so please plan on sending extra spending money with your camper!