



**2012 FAMILY CAMP
REGISTRATION APPLICATION**

FEES: \$260 per adult **SPECIAL JULY SESSION FEES**:** \$200 per adult
 \$210 per child \$160 per child
 \$100 deposit per family

If you have more than 3 children, the add'l children pay half the child rate*

* "additional children" applies to nuclear family members. Cousins, friends, etc. cannot count toward the three children.

** July session is one full day shorter in duration

PLEASE NOTE: DUE TO POPULARITY AND LIMITED SPACE, FAMILIES WILL BE ACCOMMODATED ON A FIRST-COME, FIRST-SERVE BASIS.

FOR OFFICE USE:

Date Rec'd: _____

Deposit: _____

Check No: _____

Please make check or money order payable to **Camp Christopher**

Send no cash in mail. \$25 fee for all NSF checks or declined credit cards.

		First Choice	Second Choice	Amount Enclosed \$ _____	
Session I	Sun., June 10 - Fri., June 15	<input type="checkbox"/>	<input type="checkbox"/>		
Session II	Tues., July 3 – Sat., July 7* *Note shorter week	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Check <input type="checkbox"/> Visa/MC	
				MC/Visa # _____	
Session III	Sun., August 12 - Fri., August 17	<input type="checkbox"/>	<input type="checkbox"/>	Exp Date _____	Signature _____

PLEASE PRINT OR TYPE – Please include last names for all participants

Father _____

Mother _____

Child _____ Age _____ Child _____ Age _____

Child _____ Age _____ Child _____ Age _____

Child _____ Age _____ Child _____ Age _____

Home Address _____

City _____ State _____ Zip _____

Telephone _____ Parish _____

E-Mail _____

Signature _____

Mail to:
Camp Christopher Family Camp
812 Biruta St.
Akron, OH 44307
(330) 376-CAMP, 1-800-CYO-CAMP
www.campchris.org
campregistrar@clevelandcatholiccharities.org