



# 2017 Family Camp Application

Dates – Sunday August 27<sup>th</sup> 2pm – Wednesday August 30<sup>th</sup> 10am

Parent #1: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent #2: \_\_\_\_\_ Email: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City Zip

Child #1: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Fall '17 Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Child #2: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Fall '17 Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Child #3: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Fall '17 Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Child #4: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Fall '17 Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Cabin preference/Families you'd like to be near: \_\_\_\_\_

**RATES:** \$425/adult (16yrs & older) \$350/kid (4yrs – 15 yrs) 3 & under - free

METHOD OF PAYMENT		
<input type="checkbox"/> Check	<input type="checkbox"/> MasterCard	<input type="checkbox"/> Visa
CARD #: _____	Exp. Date: _____ / _____	
Name as printed on card: _____	Amount: \$ _____	
Billing Address: _____		
City: _____	State: _____	Zip: _____ 3 digit CVV#: _____
Card Holder Signature: _____		
Deposit of \$250 required with application, full payment due by June 1 <sup>st</sup> .		

If paying by check, please enclose this application and check made out to Mountain Camp addressed to:  
**Mountain Camp, 250 Lafayette Circle #200, Lafayette, CA 94549**  
**Phone 415-351-2267, Fax 415-351-3939, [info@mountaincamp.com](mailto:info@mountaincamp.com)**  
(Please complete both sides)

## CONDITIONS OF ENROLLMENT

1. The camp reserves the right to dismiss anyone whose conduct is dangerous, illegal, or unsatisfactory at the discretion of the camp director, or is detrimental to the camp and/or to other campers. This includes drug use or smoking on site. No refunds are given to dismissed campers.
2. All family members agree to abide by the rules of camp set for the health, safety and welfare of all campers.
3. The undersigned parent or guardian consents to the use of any pictures of the camper to be used in advertising or promotion by Mountain Camp, the American Camping Association (ACA), or the Western Association of Independent Camps (WAIC).
4. The camp is not responsible for articles of clothing or personal belongings lost, damaged by fire, theft etc. Please DO NOT bring items of monetary or great sentimental value to camp.
5. In case of medical or surgical emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize and secure proper treatment for the camper(s) listed. All such expenses will be the responsibility of, and shall be paid for by, the parents or guardians.

## WAIVERS OF LIABILITY

I understand and acknowledge that certain camp activities, whether or not listed in the brochure or web site, which include but are not limited to sailing, swimming, ropes course, mountain bikes, mountain scooters, out of camp trips, water skiing, wakeboarding, tubing, etc. have an increased risk of injury associated with them. I hereby release and agree to indemnify and hold harmless, Mountain Camp and all of its officers, directors, employees, agents and representatives whatsoever from any and all losses, claims, damages, liabilities, costs and expenses including attorneys fees, which they or any of them, or camper may sustain or incur in any way arising out of or in connection with campers participation in any and all camp activities.

I have read and understood all of the above conditions and having enrolled a camper in Mountain Camp agree to be bound by them.

\_\_\_\_\_  
(Signature of Parent #1)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of Parent #2)

\_\_\_\_\_  
(Date)

### Cancellation Policy (All cancellations must be submitted in writing)

- Deposit **is Non-Refundable after June 1<sup>st</sup>**.
- Cancellations made prior to June 1<sup>st</sup>: All payments returned, except \$50 processing fee.
- Cancellations after June 1<sup>st</sup>: No refund unless replacement can be found. If replacement is found, all payments returned **except** \$250 deposit.
- In the event of severe injury or illness preventing family from attending camp which occurs 10 days or less from start of camp and when a replacement cannot be found: Family and Mountain Camp share a 50-50 loss (**excluding** \$250 deposit).
- Camper sent home for disciplinary reason: No refund