

CAMP REGISTRATION FORM

Online registration available at ebiz.gsccc.org or mail this form along with payment to Girl Scouts of the Colonial Coast, 912 Cedar Rd, Chesapeake, VA 23322 **by May 15th.**

Camper Information

Full Name _____ Birth Date ____/____/____ Grade in Upcoming Fall _____
 Address _____ City _____ State _____ Zip _____

While at camp, place my daughter with her buddy _____

Please indicate camper's t-shirt size. Available in Youth S-L and Adult S-XL. Youth _____ OR Adult _____

Caregiver Information

Name _____ Cell Phone _____ Email _____

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Name _____ Cell Phone _____ Email _____

Register for all camp sessions your camper plans to attend by filling in the name and date of each session. Minimum \$50 non-refundable deposit required for each camp session including sessions attended with Financial Assistance. Financial Assistance is available for one camp session per year per girl based on number of requests, availability of funds, and applicant needs. Applications are available by request by contacting customercare@gsccc.org.

Name of Session	Date of Session

Payment Information

<p>Total camp registration fees = \$ _____</p> <p>- \$15 Early Bird discount (through February 1) = \$ _____</p> <p>\$25 Membership fee (if not member) = \$ _____</p> <p>Donation amount = \$ _____</p> <p>Resident Camp Care Package = \$ _____</p> <p>Camp Bucks = \$ _____</p> <p>TOTAL DUE = \$ _____</p> <p>Amount enclosed = \$ _____</p> <p>Balance due* = \$ _____</p> <p>Will you be using cookie credits? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, how much? \$ _____</p> <p>*Balance due by May 15th.</p>	<p><input type="checkbox"/> Cash <input type="checkbox"/> Money Order</p> <p><input type="checkbox"/> Check</p> <p>I agree my checking account will be debited electronically for the face amount, return check fee & return deposit item fee if returned unpaid.</p> <p>Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover</p> <p>Amount to be charged \$ _____</p> <p>Account # _____</p> <p>Expiration (MM) _____ (YYYY) _____</p> <p>Print name as it appears on card: _____</p> <p>Authorized signature: _____</p> <p><input type="checkbox"/> Check here if applying for Financial Assistance.</p>
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Caregiver Permission

I give permission for my daughter/girl to attend and participate in all camp activities, including field trips, swimming/boating and challenge activities where available, unless otherwise stated on her *Camper Health History* form.

I agree to cooperate with all rules and procedures, and understand that a deposit is due with registration and all balances are due **by May 15th.**

I understand the \$50 deposit is NON-REFUNDABLE and NON-TRANSFERABLE.

I would like to receive camp confirmation via: Email Mail

Caregiver signature _____ Date _____