

St Andrews Camp & Retreat Center

1280 State Route 49, Cleveland, NY 13041

(315) 675-9771

saintandrewscamp@aol.com

Camper Application

CAMPER INFORMATION

Sex (M / F) _____ Age _____

Full Name: _____ D.O.B: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email: _____

Grade in the Fall: _____ Youth Tee Shirt Size (S M L) Adult Tee Shirt Size (S M L)

PARENTAL CONTACT INFORMATION:

Father: _____ Street: _____

Home Phone: _____ Work: _____ City: _____ State: _____ Zip: _____

Cell: _____ Email: _____

Mother: _____ Street: _____

Home Phone: _____ Work: _____ City: _____ State: _____ Zip: _____ Cell: _____

_____ Email: _____

PARISH INFORMATION:

Home Parish: _____

Location: _____

Pastor: _____

Pastor's Phone: _____

Pastor's Email: _____

HEALTH CARE PROVIDER INFORMATION:

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Name: _____ Street: _____ Phone: _____
_____ City: _____ State: _____ Zip: _____

EMERGENCY CONTACT INFORMATION:

Name: _____ Street: _____
Home: _____ City: _____ State: _____ Zip: _____
Work: _____ Email: _____
Cell: _____
Relationship to Camper: _____

Name: _____ Street: _____
Home: _____ City: _____ State: _____ Zip: _____
Work: _____ Email: _____
Cell: _____
Relationship to Camper: _____

Acceptance at St. Andrew's Camp is determined without regard to race, gender or national origin.

St. Andrew's Camp complies with the Public Health and Accreditation Laws of the State of New York. We are:

- Licensed by the New York State Department of Health;
- Inspected twice yearly;
- Inspection reports are filed with the Oneida County Department of Health, 520 Seneca St., Utica, NY 13502

I understand that if my child's application is approved I will receive the Camper/Parent Packet which will request information which must be submitted - both myself and my child. I agree to read this material and review it with my child. Materials that need to be returned to the camp no later than June 1. I understand that as violation of rules may lead to dismissal from camp and I will be able to pick up my child, if called to do so, within 24 hours of any serious disciplinary issues.

I give permission for my child to participate in all camp activities.

I give permission and consent to allow photographs of my child to be taken during camp session activities. I further give permission and consent that any such photographs may be published and used by St Andrews Camp to illustrate and promote the camp experience and programs

Parent's Signature: _____ Date: _____

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Tuition is \$350 per week.(Family Week is \$550 for the family). At least one week's tuition is due with the application Tuition for additional weeks is due one week in advance.

Campers must arrive at the beginning of a session.

Please select the weeks your child will be attending below.

The Regular Camping Program is for ages 7 – 13. Minimum age for Teen Week is 13

- Week 1 (Family Week: July 3 - 8)
- Week 2 (Horse Week ONE: July 10 - 16)
- Week 3 (MishMash Week: July 17 - 23)
- Week 4 (Horse Week TWO: July 24 – 30)
- Week 5 (Teen Week July 31 – August 6)
- Week 6 (Family Week: August 7 - 11)

Check-in time is Sunday 1 PM - 3 PM (except Family Week, check -in Sunday 3 PM)

Check-out is Saturday 12 Noon - 3 PM (except Family Week, check out Friday)

- Horse Week Stable Fee \$90
- Transportation \$20 Pick Up from Syracuse
- Transportation \$20 Return to Syracuse

All Syracuse pick-ups must be approved by the Camp Director at least one week in advance.

TOTAL _____

If someone other than yourself is picking up your child, a written statement must be on file before the camper is released. Please call the camp for this information.

Camper Arrival Date/Time, Car, Bus, Train, Plane _____

Camper Departure Date/Time, Car, Bus, Train, Plane_____

Signature of Parent/Guardian taking camper home _____

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To be signed at time of departure from camp, unless you are having the child use public transportation.

Camper Check List

Parents: Please be sure all of the items below are complete and submitted at least two weeks prior to arrival at camp.

Applications are accepted on first apply, first accommodated basis, but no confirmation can be made until all documents are received.

- Completed Medical Evaluation, signed by parent
- Completed Medical Exam Form, signed by medical provider - physical examination, immunization history, medical history, medication orders, and emergency contacts.
- Tuition is payable at least 2 weeks prior to a session. Registrations are confirmed only after the tuition payment is received. Tuition is refundable if we are notified before June 15th of your cancellation.
- Transportation Fees, if required.

All medical forms must arrive **BEFORE** the camper comes to camp.

We reserve the right to offer your requested space to another camper on our waiting list if we have not received all of the above forms and fees 2 weeks prior to the scheduled arrival.

Please make checks or money orders payable to: St
Andrews Camp