

2008 APPLICATION



CAMPER INFORMATION

Last Name: _____ First Name: _____ Nickname: _____

Gender: M F Age(as of 6/1/08) _____ Birth Date: MM____/DD____/YY____ Grade September 2008: _____

School Attending: _____ Camper lives with: Both Parents Mother Father

Camper's Home Address: _____ Apt.#: _____

City: _____ State: _____ Zip: _____

This is the campers (circle): 1 2 3 4 5 6 7 8 9 10 year at Camp Hilltop.

Please circle camper's shirt size: Child L, Adult S M L XL. (Remember, this is for the summer of 2008).

If you are new to the Hilltop Family how did you hear about us? _____

FAMILY INFORMATION

Mother's Name _____
Home Phone _____
Business Phone _____
Cell Phone _____
E-mail _____

Father's Name _____
Home Phone _____
Business Phone _____
Cell Phone _____
E-mail _____

Please list the email you would like to have as the primary e-mail contact: _____
(E-mail addresses are never shared with anyone. They are only used for correspondence from Camp Hilltop)

SESSIONS

ALL SESSIONS BEGIN ON A SUNDAY AND END ON A SATURDAY. The Camp Fee includes lodging, board, laundry service, accident insurance, camp nursing care, programs and program supplies. The fee does not include special horse clinics, transportation, camp store and some optional trips.

Check Session Desired	Fee
8-weeks <input type="checkbox"/> SUNDAY, June 29 through SATURDAY, August 23	\$6400
6-weeks <input type="checkbox"/> SUNDAY, June 29 through SATURDAY, August 9	\$5050
<input type="checkbox"/> SUNDAY, July 13 through SATURDAY, August 23	\$5050
4-weeks <input type="checkbox"/> SUNDAY, June 29 through SATURDAY, July 26	\$3550
<input type="checkbox"/> SUNDAY, July 27 through SATURDAY, August 23	\$3550
<input type="checkbox"/> SUNDAY, July 13 through SATURDAY, August 9	\$3750
2-weeks <input type="checkbox"/> SUNDAY, June 29 through SATURDAY, July 12	\$1850
<input type="checkbox"/> SUNDAY, July 13 through SATURDAY, July 26	\$1900
<input type="checkbox"/> SUNDAY, July 27 through SATURDAY, August 9	\$1900
<input type="checkbox"/> SUNDAY, August 10 through SATURDAY, August 23	\$1850

CONDITIONS

1. If it becomes necessary, in the judgment of the Director and the Camp Health Supervisor, to use outside hospitalization, medical, surgical or dental aid for the health and well being of the camper, I hereby authorize the Camp Director to use such outside aid, which shall be billed to me or my insurance first and Hilltop's insurance as secondary coverage. Hilltop is authorized to use its own judgment for immediate handling of any situation and act as summer guardian for my child. Every effort will be made to contact the parent prior to any emergency treatment.
2. Photos & videos taken during the camp season of my child may be used for promotion. If you oppose this policy, please forward a written note stating your rejection.
3. Camp Hilltop's name, logo, written materials, slogans or variations thereof, photographs or images taken at Camp Hilltop or from Camp Hilltop's website may not be used for any purpose.
4. The camp has the right to dismiss any child if his/her actions or attitude are detrimental to the best interest of the camp or campers. Under these circumstances, no refund will be given.
5. I understand that part of the camping experience involves activities, group living arrangements and interactions that may be new to my child. New experiences come with certain risks and uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks, and I am assuming them on behalf of my child. I realize that no environment is risk-free and so I have instructed my child on the importance of abiding by the camps rules. My child and I both agree that he or she is familiar with these rules and will obey them.

TERMS

- PAYMENT SCHEDULE**
1. \$500 Deposit with Application
 2. \$500 due March 1, 2008
 3. Balance due May 1, 2008

If the above terms are not met, all discounts are null and void. In addition, all fees and the child's place in camp may be forfeited.

LATE PAYMENT FINANCE CHARGES which equals a monthly rate of 1.5% of the unpaid balance will be added. If overdue account must be referred to camps attorney for collection, parent or guardian of camper will be required to pay all attorney's fees.

- DISCOUNTS**
- Siblings** - 10% discount will be deducted from sibling's camp fee.
 - Referral** - Any family referring a new camper to Hilltop will be eligible for a credit of 5% of that camper's fee, credited to their account.
 - Super Saving** - Registrations received BY August 27, 2007 will be charged the Super Savings Fee.

CHANGES IN SESSION DATES OR REDUCTION IN LENGTH OF STAY AFTER MARCH 1, 2008 WILL RESULT IN LOSS OF ANY DISCOUNTS AND A PENTALTY OF \$250 WILL BE ASSESSED. Example: 6 weeks to 4 weeks.

REFUND OF PAYMENTS Up until March 1, 2008, \$400 of \$500 deposit is refundable. A cancellation made after March 1, 2008 will receive no refund. We make no allowances for campers arriving late. If a camper should leave camp before the end of their enrolled session for any reason other than illness, the camp shall apply one-half of the prorated camp tuition toward next year's fee. There will be no refunds of camp store, trip charges, horse clinics or transportation fees.

TRANSPORTATION SERVICE (optional) Hilltop provides transportation four times during the summer. 1) Opening day to camp. 2) From camp at the end of the first four week session. 3) To camp at the beginning of the second four-week session and 4) at the end of our camp season. The charge for this service is \$65.00 each way or \$130.00 round trip.

CAMP STORE MONEY We recommend \$10-\$15 per week, but leave this amount up to you. We find that campers having much more than this amount have trouble spending it. We suggest you discuss the Camp Store with your camper. Camp Store money is non-refundable.

SPECIAL NOTE Before each camper arrives at camp they will be sent a Camp Stuff Packet. This packet is filled with information and forms that will aid you and your camper to prepare for camp. One of the forms included in this packet is a Camper Confidential Form, which will provide us with valuable information about your child. At this time however, we need to know if your child has any significant behavioral concerns or special circumstances involving physical or psychological considerations. Camp Hilltop cannot accept the application of children who do not have the promise of living cooperatively with other children. If there is anything you should share, please explain on a separate sheet of paper and attach it to the application.

PROCESSING OF APPLICATION

I hereby apply to enroll the following child with Camp Hilltop. Please return this application to Camp Hilltop, 7825 County Highway 67, Hancock, New York 13783. A deposit of \$500.00 is required to process this application and reserve the desired session.

METHOD OF PAYMENT

1. Check made payable to: Camp Hilltop 2. Cash 3. Credit Card

Credit Card #: _____ Exp. Date: _____ Security Code: _____

Billing Address if different than campers: _____

Please note - Amount charged will follow payment schedule above unless otherwise arranged.

As parent or guardian to the enrolled camper listed on this application, I understand and agree to all terms and conditions. I understand that when the application is complete I will receive a copy of the above terms and conditions for my own records.

Parent's Signature

Date