

- 2010 CAMP DOWNER APPLICATION -

Camper's Name: Male Female

Age at time of camp: Date of Birth:

Grade in school as of September 2009:

Have you attended Downer before? How many years?

Cabinmate(s) Requested (maximum of 2):

CAMP SESSION REQUESTED:

1st Choice - From: to

2nd Choice - From: to

I will have completed 8th grade by June and wish to be in LDP 1 (two-week session only)

I will have completed 9th grade by June and wish to be in LDP 2 (two-week session only)

Parent/Guardian Name:

Mailing Address:

Town, State, Zip:

Phone Numbers - Home: Work:

Cell:

My child has special dietary needs. (An additional form will be mailed with the registration confirmation.)

Parent/Guardian Signature:

Enclosed is a check or money order payable to Camp Downer for \$

Camp fills fast! Send this application with your \$150 deposit for one-week sessions or \$330 for the two-week session to Julie Barrer, Registrar, 628 Brosseau Road, Highgate, VT 05459. Please check all information carefully. All enrollments are on a first-come, first-served basis. We will mail confirmation and informational letters upon receipt and processing of your application. Due to the high volume of registrations, please allow 2-4 weeks for receipt of your confirmation letter. Registration fee is not refundable after June 1st, 2010. Full refund policy available at www.campdowner.com