



Chewonki

REGISTRATION AGREEMENT FORM

For Office Use Only:

Deposit _____ Date _____

N / R Ack _____ Dbase _____

We'd like to enroll in the:

Boys Camp: Session I, II, IIA, IIB, Five-Week or Full (please circle one)

Girls Camp: _____ Session: I, II or Five-Day
(Program/Expedition) (please circle one)

Coed Wilderness Trips: _____ Session: I, II, Five-Week or Ten-Day
(Program/Expedition) (please circle one)

1. Participant's Full Name: _____ Male / Female (circle one)

Preferred First Name: _____ Current Age _____ Date of Birth _____
mo./day/yr.

Home Address: _____
street city state zip country

Phone Number: (_____) _____

2. Parent 1 Name: _____ Profession/Business: _____

Work Address: _____
street city state zip country

Email: _____ Work Phone: (_____) _____

Address (if different from camper's): _____
street city state zip country

Cell Phone: (_____) _____

3. Parent 2 Name: _____ Profession/Business: _____

Work Address: _____
street city state zip country

Email: _____ Work Phone: (_____) _____

Address (if different from camper's): _____
street city state zip country

Cell Phone : (_____) _____

Fax Number(s), if available: (_____) _____ Name: _____
area number

E-mail(s): _____

Participant lives with: Both parents (together) Parent 1 Parent 2. If not both, provide accurate information on the legal guardian:

4. Additional names and addresses (i.e. grandparents, summer address, step-parents, etc. you wish us to contact if necessary):

IMPORTANT

We will assume the participant's address is the address to which you wish to receive all information. *Otherwise*, to which address(es), #2-4 above, should the following information be sent? Please be specific.

Pre-camp information: _____
(health form, equipment list, etc.)

Periodic newsletters: _____

Tuition Payment Schedule/Bills: _____

Education: School Attended _____ Current Grade _____

Other family members who have attended Chewonki Programs:

| Name | Program | Sag or Hoc? | Approx. Dates |
|------|---------|-------------|---------------|
| | | | |
| | | | |
| | | | |

New participant: How did you hear about Chewonki? (please be as specific as possible)

- Family or Friend _____ School _____
- Website _____ Camp Fair _____
- Referral agent _____ Other _____

Do you have any previous camp or trip experiences? _____

Why do you want to come to Chewonki? _____

Brothers and Sisters:

- Name: _____ D.O.B _____
- Name: _____ D.O.B _____
- Name: _____ D.O.B _____

AGREEMENT:

Tuition: We enclose a non-refundable registration fee of \$700 (or \$100 and request for financial assistance) to be credited to the tuition for the camp program stated above. We understand that half of the remaining tuition is due by February 1 and the balance by May 1.

New Participant Acceptance: We ask that all first-time Chewonki participants have a short phone conversation with an appropriate program director or assistants (Boys Camp, Girls Camp, Wilderness Programs) to gauge appropriate program placement before acceptance is confirmed.

Essential Functions: The fundamental nature of Chewonki's programs require that your child be able to meet their own personal hygiene needs, be responsible for their own person and belongings, and be able to work cooperatively in a group setting.

Health: We understand that Chewonki requires participants to have a health examination by a licensed physician, physician assistant or nurse practitioner within the past two years. In addition, Chewonki requires a medical history form including a record of immunizations signed by a parent/guardian. Please be specific about any food, dietary, or health concerns that may affect your child's ability to fully participate.

Has participant previously seen, or is presently seeking, medical assistance for any physical or mental health problems?



CAMP ASSUMPTION OF RISK/RESPONSIBILITY FORM

We, the participant and the parent(s)/guardian(s) of the participant hereby acknowledge that this program may take place in a wilderness or remote setting. There is a risk of physical injury inherent to participation in programs in such settings. The demands of wilderness programs requires that participants be in good physical health and be comfortable around the water. We understand that the program in which the participant has enrolled is physically involving and that the participant may encounter risks that the participant normally may not experience. We further acknowledge that in the event of injury or illness requiring other than basic first aid that medical facilities may be several hours or in some situations more than 24 hours away. Evacuation for medical care may require the use of airplane, helicopter, boat or other emergency vehicle. For these reasons, we agree to assume full responsibility for the risks of participation in the program's activities as have been described in the material for the program received by us from The Chewonki Foundation including but not limited to injuries to the participant and all evacuation and medical expenses.

The Chewonki Foundation operates trips/programs on public and private lands, including but not limited to lands owned or managed by Katahdin Timberlands Company, Mead Paper, The Nature Conservancy, Plum Creek, The State of Maine, White Mountain National Forest, The United States Government, North Maine Woods Inc. and in Canada on lands owned by the Canadian Government, Province of Quebec, Province of Ontario, the Inuit Association of Nunavut, and the Cree Nation of Mistissini. We agree to indemnify and hold harmless the above named agencies, companies and organizations from and against any and all claims resulting from injury to the program participant named in this application.

We agree not to hold the Chewonki Foundation responsible for delayed commencement, itinerary changes to, early termination or non-operation of any Camp program caused by weather, low enrollment, unusual water levels, strikes, political or diplomatic changes or other causes beyond the control of the Chewonki Foundation.

Participant

Date

To be signed by Parent or legal guardian, if participant is under 18 years of age.

Parent/guardian

Date

Please return to:

Camp Chewonki
485 Chewonki Road, Wiscasset, Maine 04578
Tel: 207-882-7323 Fax: 207-882-4074
camp@chewonki.org