

Winter Address (September - May)  
 140 Nashoba Road  
 Littleton, MA 01460  
 Ph: (978) 486-8236  
 Fax: (978) 952-2442  
 www.CampNashoba.com  
 info@CampNashoba.com



# CAMP NASHOBA NORTH ENROLLMENT Day Campers

Summer Address (June - August)  
 198 Raymond Hill Road  
 Raymond, ME 04071  
 Ph: (207) 655-7170  
 Fax: (207) 655-4063

Child's Full Name \_\_\_\_\_ Child prefers to be called \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_ Home Phone # \_\_\_\_\_

Date of Birth (m/d/y) \_\_\_\_\_ Age (as of June 2019) \_\_\_\_\_ Sex (M/F) \_\_\_\_\_

School Grade Completed as of June 2019 \_\_\_\_\_ Name of School \_\_\_\_\_

Child's E-Mail Address \_\_\_\_\_ How did you learn about us? \_\_\_\_\_

Former Summer Camp Experience, if any \_\_\_\_\_ # years at Nashoba \_\_\_\_\_

*Please indicate your attendance preferences:*

- Option 1 (June 29 - July 3)       Option 4 (July 27 - July 31)
- Option 2 (July 6 - July 10)       Option 5 (August 3 - August 7)
- Option 3 (July 13 - July 17)

Please attach  
Photograph

One week Tuition \$500.00 includes lunch    Sibling discounts are available for residential campers only.

Golf: \$40.00 per lesson  3 times per week      Horseback Riding: \$40.00 per lesson  3 times per week

### PARENT/GUARDIAN INFORMATION

Please include your surname preference (Ms., Mrs., Mr., Dr., etc.). Attach your business card if you desire. Please print clearly!

With whom does the child reside?       Both Parents       Father       Mother       Other

Who has legal custody? (if legally separated)       Both Parents       Father       Mother       Other

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Preferred E-Mail Address \_\_\_\_\_ Occupation \_\_\_\_\_

*\*We send monthly newsletters and therefore ask that you provide at least one e-mail address.*

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Preferred E-Mail Address \_\_\_\_\_ Occupation \_\_\_\_\_

Parent/Guardian Summer Phone \_\_\_\_\_

Summer Address (if different from child's winter home ) \_\_\_\_\_

Please list all persons responsible for pick up & drop off at camp: Please list name, relationship and cell number.

Name	Relationship	Cell Number

Health Insurance Company \_\_\_\_\_ Policy/Subscriber # \_\_\_\_\_

Please note any special issues or concerns that might affect your child's adjustment at camp, i.e. divorce or separation, school, peers, etc.:

~ Has your child had psychological counseling at anytime during the 2019-20 school year? (Yes/No) \_\_\_\_\_ If Yes, please explain:

~ If your child is riding at camp, please note his/her riding experience. Proper riding gear is required for this program. We are happy to give you suggestions for inexpensive purchases.

~ Please note if your child has any dietary needs, i.e. lactose intolerant, vegetarian, food allergies etc.:

~ Please note any special sensory or physical needs your child may have:

Please refer to Parent Handbook for camper and parent policies. Tours are offered by appointment through our office. **A deposit of \$200.00 is required with the application.** No refunds will be given for late arrival or early departure from camp. **Full balances are due May 1, 2020.** Credit card payment only available for the initial deposit, not the full tuition payment. Late fees will be administered. The directors reserve the right to withdraw or expel any camper whose influence, conduct, or actions are deemed harmful or disruptive to themselves or others, and will not or cannot abide by the rules and policies of camp. If this occurs, no deduction or return of fee, or any part thereof, will be made. Parent or guardian agrees to pick up and drop off child within stated time guidelines. Enrollments after June 1 require payment in full.

Use or possession of cell phones, illegal drugs, tobacco, alcohol, fireworks, fighting or harassment, inappropriate language, any other dangerous items/conduct, or tampering with any fire-fighting/detection equipment is strictly prohibited and grounds for immediate dismissal without refund. It is agreed that any dispute or cause of action arising between the parties, whether out of this agreement or otherwise, can only be brought in Cumberland County Superior Court located in Portland and shall be construed in accordance with the laws of the State of Maine. We are committed to keeping camp enjoyable for everyone.

**Authorization for Medical Treatment:** I, \_\_\_\_\_, parent or guardian of \_\_\_\_\_, authorize any physician, nurse or other health care provider, to communicate with the medical staff and director of Camp Nashoba North, or his/her designee, about my child's medical condition, treatment, and/or prognosis. We further authorize the camp medical staff to discuss any medical conditions with the director, his/her designee, or the child's counselor when the medical staff, in its sole discretion, believes such communication to be in the best interest of the child. These authorizations are limited to June 1 through August 31, 2019. Health insurance is not provided by camp. Permission is given to use photographs or videos in which my child may appear. Your child's enrollment at Camp Nashoba® North represents your agreement to your child's participation in camp activities, and acceptance of all benefits and risk of such activities. I understand that part of the camping experience involves activities and group interactions that may be new to my child, and that they come with uncertainties beyond what my child may be used to dealing with at home. Such risks include uneven terrain, standing and moving water, forested and other areas that may result in wildlife encounters including mammals, reptiles and insects that could result in infections and various insect-transmitted diseases. I am also aware that my child may participate in off-campus activities such as hiking, athletic competitions that involve additional risks. In addition, there are certain unavoidable risks associated with various games and play activities such as collisions, wayward objects such as balls and other equipment and other risks. 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 camp's rules, and my child and I both agree that he or she is familiar with these rules and will follow them. I agree to release Camp Nashoba® North, Inc. from all claims resulting from the risks reasonably associated with camp activities. I have read and agree to the terms outlined on the pages herein.

Parent/Guardian Signature (Required): \_\_\_\_\_ Date: \_\_\_\_\_

If paying deposit by credit card: **VISA / MasterCard** (circle one) for \$200.00 deposit:

Cardholder's Name \_\_\_\_\_ Signature \_\_\_\_\_

Card # \_\_\_\_\_ Expiration Date (m/d/y) \_\_\_\_\_

Security Code (located on back of card) \_\_\_\_\_

This is not a binding agreement until you have received a confirmation of enrollment from the camp office.

Please send all payments to our winter address indicated at the top of page 1 until May 1<sup>st</sup>.

We will then be at our summer office. If you are vacationing in Maine for the summer please provide your local address and land telephone number to the office.

**Drop off Time 8:40 AM Pick Up Time 4:45 PM** Please note camp continues to operate on rainy days.

