

# CIT 3 REGISTRATION FORM

Campers Name _____		Date of Birth _____		Male or Female _____	
Address _____		City _____		State _____	
Zip _____		Home Phone _____		Home Email _____	
Grade Completed _____		Age _____		School _____	
Parent/Guardian _____		Employer _____			
Occupation _____		Work Phone _____		Cell _____	
Parent/Guardian _____		Employer _____			
Occupation _____		Work Phone _____		Cell _____	

<u>Day Camp Weeks</u>	<u>Resident Camp Weeks</u>
_____ 1. July      6 - 10	_____ 1. July      5 - 10
_____ 2. July      13 - 17	_____ 2. July      12 - 17
_____ 3. July      20 - 24	_____ 3. July      19 - 24
_____ 4. July      27 - 31	_____ 4. July      26 - 31
_____ 5. August    3 - 7	_____ 5. August    2 - 7
_____ 6. August    10 - 14	_____ 6. August    9 - 14
_____ 7. August    17 - 21	

(Please list 3 possible choices)      (If you choose a resident camp week, make sure your day camp selections fall before your resident camp selections)

<u>Balance Due</u>	
Day Camp - \$50	\$ _____
<i>Includes 2 CIT shirts and both day camp weeks - additional fee for resident camp</i>	
Resident Camp - \$295	\$ _____
DVD Preorder - \$10	\$ _____
<input type="checkbox"/> Yes! I would like to donate to Camp Talooli's campership fund!      \$ _____	
<b>Total Due \$ _____</b>	
Make checks payable to: <b>Camp Fire USA</b>	

<p><b><u>DAY CAMP BUS 1 - Weeks 1-6</u></b> (Please CIRCLE one)</p> <p><input type="checkbox"/> 7:30/5:00 Dollar Tree (Kirkville Rd)</p> <p><input type="checkbox"/> 7:50/4:40 Cicero Elementary</p> <p><input type="checkbox"/> 8:05/4:25 Bear Road School</p> <p><input type="checkbox"/> 8:20/4:10 Glenn Crossing (Rte. 57)</p> <p><input type="checkbox"/> 8:30/4:00 P &amp; C (Rte. 57)</p>	<p><b><u>DAY CAMP BUS 2 - Weeks 1-6</u></b> (Please CIRCLE one)</p> <p><input type="checkbox"/> 7:30/5:00 Dick's Sporting Goods (Fairmount)</p> <p><input type="checkbox"/> 7:45/4:45 719 E. Genesee St. (Downtown Syr)</p> <p><input type="checkbox"/> 8:00/4:30 P &amp; C Plaza - Downer St. (B'ville)</p> <p><input type="checkbox"/> 8:15/4:15 Lamson Rd. Park (Phoenix)</p> <p><input type="checkbox"/> 8:30/4:00 River Glen Mall (Fulton)</p>
<input type="checkbox"/> <b><u>PARENT DRIVE</u></b> I will drive my child to and from camp	

***We reserve the right to change bus stops based on demand.***

I will print the medical and informational letters from: [www.campfireusacny.org](http://www.campfireusacny.org)       yes     no

I give permission to use photos/DVD in which my child appears for Camp Fire USA publicity       yes     no

My child has permission to participate in the Camp Talooli program      **Signature** \_\_\_\_\_

**Send completed form to:** Camp Fire USA, 7 Adler Drive, East Syracuse, NY 13057 (315) 463-8799