FAMILY CAMP 2016 REGISTRATION FORM

(online registration available at www.anokijig.com)

Please print all information and fill out this form as completely and accurately as possible.

Please fill out a separate form for each weekend that you plan to attend (copies are fine).

A Non Refundable \$50.00 per person deposit must accompany each registration. (no deposit for those under 3 yr. of age)

First Name:		Last Na	me:		
Address:					
	State: Zip:				
Daytime Phone:		Ce	II Phone:		
Email					
	about Anokijig				
WEEKEND:	(Check 1 per form)				
☐ Memorial Day (May 27-30, 2016) ☐ Lab HOUSING PREFERENCE: (We will try our best to fulfill your housing preferences but if we cannot Choice 1: Choice 2:		nnot do so to your satisfaction we will refund your deposit)		Fall Colors (October 7-9, 2016) Housing Choices: Tents: Cabins: Rippling Ridge Lakeview	
				Moo Eastman Lodge Turtle Island Thunderbird Hickory Hillcrest Meyers Lodge	
Choice 3:				Timberline Brave Village	Voigt Lodge Health Lodge
Number of Campers 3 & Under_	ry to place you with another family By Age: 4-12 13 & Gluten Free	& up	If you are registering as a represente following information (atta Other Family Contact Names:	nch separate sheet if nec	
PAYMENT: Total An	nount Due:	Deposit	Paid:	Balance Due:	
Check No:(or) Credit Card: (0			Master Card		American Express
CC#:				_	
		V-Code:		_(last 3-4 digits in signature line)	
Name on Card:		Signature:			
 Friends of Ca the responsible By participating and images to the FOCA, its officts staff, and volous State Codes reall guests wild behavioral Summer Family/party 	resentative registering for this mp Anokijig (FOCA) and Camp bility of each camper/guest and ng in camp programs, permissi aken of guests for purposes whicers, directors, agents, board runteers are not responsible for require Anokijig to maintain a gold be provided at the time of arrupervision of minors is the sole will be responsible to reimburs	Anokijig do not covor his/her insurance of his/her insurance of his/her insurance of his/her his/her fock and common his/her fock, and emplor lost, damaged, or signest list with addresival or earlier. responsibility of passe Camp Anokijig fo	e that I and my family mer yer guests health and medicarrier. OCA and Camp Anokijig to Camp Anokijig may deem a loyees, and Camp Anokijig, stolen articles. Esses and contact information and the contact information and camp damages (losses) or any damages (losses) or any damages (losses)	cal expenses. Healt use photos, videos, ppropriate. its directors, emplo on. Names, addres alterations, maliciou	thcare expenses are , voice recordings, oyees, members, s, phone, & e-mail of
"full replacen	e party's members or their gue: nent costs". mbers of my family/party will b		by all of the "Camp Anoki	jig Regulations & Sa	afety Rules"
nify, and hold ployees, men Anokijig, as v board membo	(copies of policy available upon request). By participating in this program it will be assumed that I and my family members/party members waive any claims against, indemnify, and hold harmless FOCA, its officers, directors, agents, board members, and employees, Camp Anokijig, its directors, employees, members, staff and volunteers for injuries, damages, or losses that may result from occurrences on the property of Camp Anokijig, as well as the conduct of other persons including participants in the Camp Anokijig programs, FOCA, Camp Anokijig, its board members, directors, officers, agents, employees, staff, and volunteers. PRINTED NAME				
					