

GIRL SCOUTS OF CONNECTICUT. INC.

www.gsofct.org 1-800-922-2770



2009 SUMMER CAMP REGISTRATION FORM

Registration begins February 23, 2009. Registration is also available online at www.gsofct.org.

Some programs fill quickly, avoid disappointment, register early!

- Fill out completely *in ink* and send with a **\$50 non-refundable deposit** for each Program.*
- Payment in full is due **four (4) weeks** prior to the start of camp.
- Phone registrations will **not** be accepted.
- Cookie Credits cannot be used towards deposit and are not redeemable online.
- A charge of \$10 will be added for voluntary program changes.

Mail completed registration and required deposit/payment to:

**Girl Scouts of Connecticut
Registration Department
20 Washington Avenue
North Haven, CT 06473
Phone (203) 239-2922
Fax (203) 234-6828**

Camper's Name		Troop Number	Date of Birth (Mo/Yr)	Level	<input type="checkbox"/> D <input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> C <input type="checkbox"/> S <input type="checkbox"/> A
				<input type="checkbox"/> Boy	<input type="checkbox"/> Non-Girl Scout
Mailing Address		City	ST	Zip	Grade in Fall 2009
1 st Guardian's Name	Home Phone	Work Phone	Cell Phone	Email	
2 nd Guardian's Name	Home Phone	Work Phone	Cell Phone	Email	

Desired Camp and Session (Only one [1] camp and one [1] program per registration form – Form may be duplicated)

	Resident	Day	Name of Camp	Name of Program	Dates	Fee
First Choice			Clatter Valley Day Camp	Go Green	July 13 - 18	\$150.00
Optional Programs				Peter Pan fee		\$25.00
				Program Aid		\$75.00

Girl Scout Membership Fee (If not currently registered as Girl Scouts – does not apply to Peter Pans) **\$10.00**

Save the postage. I will download my daughter's health forms and confirmation packet from www.gsofct.org.

I would like to be mailed the health forms and confirmation packet.

<input type="checkbox"/> Please send me a financial aid packet. *Note: Campers requesting financial aid require a \$20 deposit, which is refundable if award is insufficient.	Subtotal Fee	
	Deduct Expected Cookie Credit	-
	Deduct Early Bird (prior to June 15, 2009)	-
	TOTAL FEE DUE	

One camper BUDDY (Buddies must sign up for the same camp program and indicate each other's name as "Buddy" on their registration forms.)

- I give my permission for my child to participate in all camp activities; most of which are conducted in an outdoor environment.
- I have read the camp brochure and agree to cooperate with all the regulations.
- I am willing to have my children treated by a Nurse or First Aider for minor ailments and by a doctor, when necessary, and agree to transportation to a medical facility or for further medical attention, if necessary.
- The council may reproduce any photo images taken of my child for Girl Scout publicity purposes.
- My child has permission to take scheduled trips out of camp during her camp session.
- **I have read and accept the refund policy in the camp brochure.**

Guardian's Signature: _____ Date Signed: _____

Payment Information

Full Fee will be charged to credit card at time of registration. If prior to 6/15, Early Bird Discount will be applied.

Enclosed Check (Payable to GSOFCCT.)
 Note: A \$30 fee, plus collection costs, will be applied to any returned checks.

Credit Card (Mandatory for online or faxed reservations)

Money Orders

MasterCard VISA Discover AMEX

Amount Enclosed

Account Name (As it appears on the card)

Balance Due

Account Number _____ Expiration Date _____ / _____ Signature _____

Office Use Only

Pay date	Amount	Check #	Discount	Early Bird	Staff	Cookies	Other	Program Code	Bus Code
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