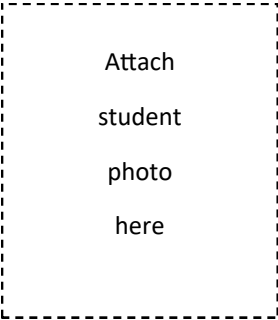


# 2019 Good Counsel Camp

## Application For Enrollment



**See Reverse For Session Fees & Discounted Payment Plan**

*Each session limited to 130 Campers due to bunk space*

**Application will not be processed without photo**

**Please Check By Session (s) To Be Attended**

Session 1 (13 days) Sun, June 9 - Noon Fri. June 21 \_\_\_\_\_  
 Session 2 (6 days) Sun, June 23 - Noon Sat. June 29 \_\_\_\_\_  
 Session 3 (13 days) Sun, June 30 - Noon Fri. July 12 \_\_\_\_\_  
 Session 4 (13 days) Sun, July 14 - Noon Fri. July 26 \_\_\_\_\_

**In Between Sessions**

Session (1 to 2) \$80.00 per camper \_\_\_\_\_  
 Session (2 to 3) \$50.00 per camper \_\_\_\_\_  
 Session (3 to 4) \$80.00 per camper \_\_\_\_\_

*I hereby request that my child/ward be accepted for enrollment at Good Counsel Camp. I hereby consent to my child participating in the many events at camp that are described in this application and in the brochure and other promotional materials. I understand and assume the risks inherent with these camping activities, but also understand that all reasonable care and supervision will be exercised to provide for the general well being of my child.*

**One Form Per Camper - Please Print or Type**

**Today's Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Camper Name** \_\_\_\_\_ **Nick Name Camper wishes to be called** \_\_\_\_\_

**Date of Birth** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Male** \_\_\_\_\_ **Female** \_\_\_\_\_ **Age Camper will be during chosen session** \_\_\_\_\_

**Home Phone** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Work Phone** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ **Cell Phone** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Mailing Address** \_\_\_\_\_ **City** \_\_\_\_\_ **ST** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Country** *(if other than the U.S.)* \_\_\_\_\_ **E-Mail** \_\_\_\_\_

**Local Address** *(if different from above)* \_\_\_\_\_

**City** \_\_\_\_\_ **ST** \_\_\_\_\_ **Zip** \_\_\_\_\_

**School Attending** \_\_\_\_\_ **Church Attending** \_\_\_\_\_

**Parent (s) Name** \_\_\_\_\_ **Parent Signature** \_\_\_\_\_

**If possible, I request my camper to be in the same cabin with** \_\_\_\_\_

*Fees include: meals, housing, basic supplies, bus transportation for camp activities, laundry, accidental insurance, awards, badges, handicraft materials, etc.*  
 Camp T-shirts will be available for purchase at \$12.00 each. If interested, please indicate campers shirt sizes below for our ordering purposes. Shirts will be available at check-in and during canteen operating hours.

**Youth Size:** M \_\_\_\_\_ L \_\_\_\_\_ **Adult Size:** S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL \_\_\_\_\_ **Number of shirts desired** \_\_\_\_\_

*This application for enrollment is to be accompanied by full payment. If you wish to register after June 1, please call to confirm available space, then send corresponding fee for appropriate number of children.*

**Scholarship Fund:** To help support campers who would otherwise be unable to attend Good Counsel Camp due to financial reasons, I am enclosing my tax deductible donation in the amount of:

\_\_\_\_\_ \$5.00 \_\_\_\_\_ \$10.00 \_\_\_\_\_ \$15.00 \_\_\_\_\_ \$20.00 \_\_\_\_\_ \$25.00 \_\_\_\_\_ Other

I am in need of financial assistance in the amount of \$ \_\_\_\_\_.

**Special Note:** Cell phone, knives, hatchets, sparklers or firecrackers are not permitted. No dogs, cats, or pets are permitted. Campers may have visitors by permission only. Campers may not be reached at camp by telephone. Only in an emergency may campers use the phone. Questions regarding the above policies will be answered by contacting the camp director. In case of emergency when parent or guardian cannot be reached, please call

**Name:** \_\_\_\_\_ **Phone** (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Please make checks payable to:** Good Counsel Camp and mail to: 4301 W Homosassa Trail, Lecanto, FL 34461. Please send inquiries and correspondence to the above address or call the business office at (352) 270-8831. Or fax to Office Fax (352) 746-2335, Camp Fax (352) 726-3212. **Confirmation of Reservation is Not Made Until Completed Form with Student Photo and Full Payment are Received by the Camp Director.**

Do Not Write In This Space			
Session Fee \$ _____	Weekend Fee \$ _____	Amount Paid \$ _____	Check No. _____
Date Paid ____/____/____	Bal. Due \$ _____	Check No _____	Bal. Due \$ _____
Canteen Deposit \$ _____	Boy ___ Girl ___ Age _____	Cabin No. _____	Date Accepted ____/____/____

## 2019 Good Counsel Camp Summer Camp Dates & Prices

**Rates Are For 1 Camper**

**If Paid In Full**

	By Mar 1st	By May 1st	After May 1st
Session 1 (13 days) Sunday, June 9 - Noon Friday, June 21	\$600.00	\$625.00	\$650.00
Session 2 (6 days) Sunday, June 23 - Noon Saturday, June 29	\$370.00	\$385.00	\$405.00
Session 3 (13 days) Sunday, June 30 - Noon Friday, July 12	\$600.00	\$625.00	\$650.00
Session 4 (13 days) Sunday, July 14 - Noon Friday, July 26	\$600.00	\$625.00	\$650.00

### Weekend Fees

**(For Those Campers Staying for 2 Consecutive Sessions)**

Session 1 to 2 (Friday, June 21 - Sunday, June 23) \$80.00 per camper

Session 2 to 3 (Saturday, June 29 - Sunday, June 30) \$50.00 per camper

Session 3 to 4 (Friday, July 12 - Sunday, July 14) \$80.00 per camper

### Fees For Multiple Campers From Same Immediate Family

		If Paid In Full		
		By Mar 1st	By May 1st	After May 1st
Session 1	2 Children	\$1150.00	\$1200.00	\$1260.00
	3 Children	\$1665.00	\$1745.00	\$1845.00
	4 Children	\$2165.00	\$2255.00	\$2375.00
Session 2	2 Children	\$ 695.00	\$ 730.00	\$ 770.00
	3 Children	\$ 995.00	\$1035.00	\$1090.00
	4 Children	\$1295.00	\$1345.00	\$1405.00
Session 3	2 Children	\$1150.00	\$1200.00	\$1260.00
	3 Children	\$1665.00	\$1745.00	\$1845.00
	4 Children	\$2165.00	\$2255.00	\$2375.00
Session 4	2 Children	\$1150.00	\$1200.00	\$1260.00
	3 Children	\$1665.00	\$1745.00	\$1845.00
	4 Children	\$2165.00	\$2255.00	\$2375.00

### Make Checks Payable To:

**Good Counsel Camp** and enclose with completed form on reverse.

All Funds To Be Paid in U. S. Dollars. Thank You!

*For further information, write to:*

**Good Counsel Camp  
4301 W Homosassa Trail  
Lecanto, FL 34461**

**Camp Business Line:** (352) 270-8831 Fax (352) 746-2335

**Camp Phone Line:** (352) 726-2198 Fax (352) 726-3212

See packing list for refund policy.