

YMCA CAMP NELLIE HUCKINS

Name _____ Date _____
Address _____ Age _____
City _____ State _____ Zip Code _____
Birthday: M ___ D ___ Y ___ Phone (____) _____ - _____

This will be my _____ year at Camp Huckins Sister: _____
Grade I am currently attending _____ Grade: _____

Session I would like to Attend: 1 2 3 4
If space is available, I would like to attend for 4 weeks:

I have the following Alumni connection to Camp Huckins:

Name _____ Relationship to Camper _____
Maiden Name _____ Years Attended _____

Cabin Request for one friend _____
(Must be Mutual)

(Signatures Required on Reverse Side)

FOR OFFICE USE ONLY: Date rec'd: ___/___ \$___ Check #___

I wish to enroll my daughter at YMCA Camp Huckins. I have enclosed my non-refundable deposit. I authorize the camp directors to act for me in their best judgment in any emergency. I understand Camp Huckins personnel have the right to inspect all belongings brought to camp. Any prohibited items will be confiscated. Items will be returned to camper upon departure. I also understand that my daughter is expected to understand and comply with all rules. Camp Huckins reserves the right to dismiss any camper for undesirable behavior. If my daughter should be dismissed from Camp Huckins I will make arrangements for her to be picked up as soon as possible. I give permission to Camp Huckins to have and use photographs, slides, moving pictures, video tapes of my daughter as may be needed for records, public relations, and to publish my daughter's address in the camp yearbook. I have requested Camp Huckins to allow my daughter to participate in all activities, including but not limited to horseback riding, water skiing, and mountain hikes. As a condition of receiving this benefit, I agree to allow my daughter to participate in all activities offered by Camp Huckins, fully understanding that these activities may involve some risks. The person signing this application will be held responsible for payment of all fees.

Signed: _____

(Parent or Guardian)

Parent or Guardian #1 _____ Business Phone (____) _____ - _____

Occupation: _____ Cell Phone (____) _____ - _____

Parent or Guardian #2 _____ Business Phone (____) _____ - _____

Occupation: _____ Cell Phone (____) _____ - _____

Parent/Guardian E-mail _____

With whom does the child reside? Mother/ Father Mother Father Guardian : _____

I hereby apply for a place at Carroll County YMCA Camp Huckins and will do my part to uphold the purposes and ideals of the camp.

Signed: _____

Signature of Camper

Camper E-mail: _____

YMCA Camp Huckins, 17 Camp Huckins Road, Freedom, NH 03836-4403