

# Summer 2006 Registration

**Please fill in both sides.  
ONE FORM PER CAMPER.**

**Space fills up quickly! Please return completed forms  
before July 15th, 2006 to:**

CAMP TEN TREES  
1122 East Pike Street,  
PMB #1488  
Seattle, WA 98122

Phone: 206.985.2864, ext 1  
Fax: 206.525.3351, attn: Camp Ten Trees  
info@camptentrees.org  
www.camptentrees.org



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Camper's Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Camper's Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Guardian e-mail: \_\_\_\_\_  
 Birthdate: \_\_\_/\_\_\_/\_\_\_ Age in August 2006: \_\_\_\_\_ Grade in Fall 2006 \_\_\_\_\_ Gender: \_\_\_\_\_  
 T-Shirt Size (please circle): YM YL AS AM AL AXL AXXL List all summers you have attended Camp Ten Trees: \_\_\_\_\_  
 How did you hear about Camp Ten Trees? \_\_\_\_\_

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**Camper will be attending the following session:**

- Session 1: August 13-19, 2006  
A one-week session for children of LGBTQ families, ages 8-15.
  - Session 1 Teen Program: August 13-19, 2006  
For children of LGBTQ families, ages 16-18
  - CIT Program: August 13-19, 2006  
For youth ages 16-18. Application must be accepted  
Contact us for a full CIT application
  - Session 2: August 20-26, 2006  
A one-week session for LGBTQ/questioning youth ages 13-18.
  - Multi-Gender Cabin. This cabin is intended for Session 2 campers dealing with gender identity issues.
  - Cabin information  
If you know someone of the same age who is coming to camp, you may request to be in the same cabin.  
Other camper's name: \_\_\_\_\_
- .....

**Parent/Guardian #1**

**Parent/Guardian #2 (if applicable)**

**Parent/Guardian #3 (if applicable)**

Name: _____	Name: _____	Name: _____
Address: _____ <i>(if differs from above)</i>	Address: _____ <i>(if differs from above)</i>	Address: _____ <i>(if differs from above)</i>
Home phone: _____	Home phone: _____	Home phone: _____
Work phone: _____	Work phone: _____	Work phone: _____
Cell ph/pager: _____	Cell ph/pager: _____	Cell ph/pager: _____
E-mail Address: _____	E-mail Address: _____	E-mail Address: _____

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**Emergency Contact #1 - other than names above!**

**Emergency Contact #2 - other than names above!**

Name: _____	Name: _____
Address: _____	Address: _____
Home phone: _____	Home phone: _____
Work phone: _____	Work phone: _____
Cell ph/pager: _____	Cell ph/pager: _____
E-mail Address: _____	E-mail Address: _____

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If anyone other than the adults listed under Parent/Guardian or Emergency Contacts will be picking up camper, please indicate:

Name & Relationship to camper: \_\_\_\_\_ Phone number: \_\_\_\_\_

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**This section is optional, but helps us with our funding and our ability to ensure we are reaching people from a wide variety of backgrounds.**

Child's ethnic background/identity: \_\_\_\_\_

- Annual household income:     under \$15,000     \$25,000-\$35,000     \$45,000-\$55,000     \$75,000-\$100,000  
     \$15,000-\$25,000     \$35,000-\$45,000     \$55,000-\$75,000     Over \$100,000

Number of adults responsible for child in household: \_\_\_\_\_ Number of children in household: \_\_\_\_\_

Immigrant or refugee? (Yes/No): \_\_\_\_\_ If yes, from what country?: \_\_\_\_\_

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Cabins are assigned by grade. Is there anything we need to know about your child when assigning cabins (ie: usually associates with younger/older children, skipped a grade, etc.)? \_\_\_\_\_

You will receive medical forms to fill in once you have registered. However, PLEASE note any dietary restrictions, allergies, or special needs\*: \_\_\_\_\_

\*Camp Ten Trees can accommodate campers with some special needs. We work with families on a case by case basis to determine what is best for their camper. Please contact us to discuss special needs, whether they be physical, mental, behavioral, or dietary.

### Sliding Scale Payment:

**PLEASE NOTE:** Camp Ten Trees is a non-profit summer camp and needs to cover the cost of running a high quality program. It costs camp at least \$375 to cover the expenses of one camper at camp for one week. PLEASE respect all families and camp by paying the full amount you can afford. It is challenging to run a summer camp with a sliding scale, and your accurate tuition payment makes us able to do so. At the same time, we understand the financial stress that many families face. Camp Ten Trees is committed to making our program available to all campers, regardless of their ability to pay. Please place yourself on the sliding scale and pay what you think is right for you. For families with extremely limited resources or special circumstances, please contact us about fully paid scholarships.

**IF YOU ARE SENDING A CAMPER FOR BOTH WEEKS:** Please note that a camper attending for both sessions must pay at least \$375 for one week and the sliding scale price for the other week, bringing to a total of minimum \$415 for two weeks of camp. While we understand that campers may identify with both weeks, we are not at present able to offer discounts for more than one week per camper. Youth attending the CIT program and Session 2 of camp must pay a minimum of \$400.

Household Income	Camp Tuition			
	For a family of two	For a family of three	For a family of four +	If attending both sessions
Up to \$9,000	\$50 - \$100	\$50 - \$80	\$50 - \$65	\$415 - \$450
\$9,000 - \$15,000	\$60 - \$150	\$55 - \$105	\$55 - \$70	\$425 - \$475
\$15,000 - \$20,000	\$100 - \$200	\$60 - \$150	\$60 - \$120	\$450 - \$510
\$20,000 - \$28,000	\$150 - \$275	\$100 - \$250	\$90 - \$180	\$475 - \$550
\$28,000 - \$35,000	\$225 - \$350	\$150 - \$275	\$115 - \$225	\$500 - \$600
\$35,000 - \$45,000	\$325 - \$375	\$245 - \$325	\$155 - \$275	\$550 - \$680
\$45,000 - \$60,000	\$350 - \$425	\$300 - \$375	\$200 - \$350	\$600 - \$750
\$60,000 - \$75,000		\$350 - \$425	\$325 - \$375	\$700 - \$775
Above \$75,000			\$350 - \$425	\$750 - \$800

Camp Ten Trees offers a 10% discount for each additional camper.

I have calculated my tuition to be \$ \_\_\_\_\_

Camp Ten Trees requires a deposit of at least 50% of your calculated tuition when you send in your registration fee. Please include this amount.

The balance of your tuition is due by July 15th. If you are registering after July 15th, your full tuition is due at the time of registration. If you cannot pay 50% in deposit, or need to work out a payment plan, please contact us and we will work with you.

Please check one:  I am including a deposit of 50% (before July 15th)  I am including my full tuition (required after July 15th)

CITs pay 75% of their calculated tuition for Session 1. All money towards Session 1 CIT program cost will be refunded if you are not accepted into the program. Note: Youth attending the CIT program AND Session 2 of camp must pay a minimum of \$400.

Cancellation Policy: Up until June 15th, all fees except for a \$25 processing fee can be refunded. From June 15th- July 15th 70% of camp tuition less \$25 processing fee is refundable. After July 15th, all fees are non-refundable.

Parent/Guardian Authorization: I understand that some camp activities have inherent risks. My child or ward has permission to participate in the camp activities during the session for which s/he is hereby enrolled. I will assure that my child is properly prepared for all activities including having proper clothes and equipment, being in good health and willing and able to participate in camp activities, and willing to abide by camp policies and follow directions of camp personnel. I understand that reasonable measures will be taken to safeguard the health and safety of all participants and that I will be notified as soon as possible in case of any emergency affecting my child or ward. In the event that I cannot be reached in an emergency, I hereby authorize the emergency contact people to act on my behalf. Furthermore, in the event that I cannot be reached, I authorize Camp Ten Trees to select a physician and/or hospital to provide emergency medical and surgical treatment and to provide routine non-surgical medical care for my child. I accept responsibility for the costs of such medical treatments. I hereby give permission to the medical personnel selected by the camp to provide routine health care; to administer medications; to order X-rays, routine tests, treatment; to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation.

I understand that my child can be dismissed from camp for reasons including, but not limited to: chronically disruptive behaviors, illegal activity, breaking of camp rules, contagious illness, or destruction of property. If my child is dismissed from camp, I understand that it is my responsibility to arrange transportation for my child to return home.

Unless I have checked the box below, then in the event that my child or ward is photographed, videotaped, or recorded at camp, I will allow Camp Ten Trees to use the material for promoting the camp through web sites, brochures, or other means. My child will not be identified by name in any of these promotional materials.

Check here if you DO NOT want Camp Ten Trees to use any photographs, videos, or recordings of your child for promoting the camp through web sites, brochures, or other means.

I have read the Parent/Guardian Authorization and will abide by judgements made by Camp Ten Trees staff.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_