

Alumni Weekend 2019 Registration Form

Participant #1: _____ Date of birth: _____ Prior Years at Weekeela: _____

Participant #2: _____ Date of birth: _____ Present Age: _____

Participant #3: _____ Date of birth: _____ Present Age: _____

Participant #1: Home Address: _____

Please make a copy of these pages for your records.

Participant #1: Cell Phone: _____
E-mail: _____@_____

Participant #2: (If applicable): Cell Phone: _____
E-mail: _____@_____

Participant #3: (If applicable): Cell Phone: _____
E-mail: _____@_____



A deposit secures your space. (Includes Lodging, Meals and Activities) **Please check one:**

- * Private Cabin: \$300.00 per person
- * Semi-Private Cabin: \$250.00 per person
- * Shared Cabin: \$200.00 per person
- * Children ages 2-17 \$75.00 per person
- August 17th only: \$50.00 (Does NOT includes Lodging. Does includes Meals and Activities)

I have read and agree to the terms outlined above and on the second page of this Alumni Weekend 2019 Registration Form.

**** Rates include all lodging, meals and activities.***

_____ I enclosed a check deposit of \$100.00 for each participants (s) (please make checks payable to Camp Weekeela).

_____ I signed the Visa/MasterCard authorization for the deposit of \$100.00 and for all future payments.

No refunds after April 16, 2019.

Payment due in full on or before June 1, 2019

Please charge my: Visa / MasterCard (American Express is NOT accepted)

Name on Card: _____

Number: _____ Exp. Date: _____ CCV #: _____

PARTICIPANTS(S): I have other children who will attend Camp Weekeela in the future:

Name: _____ Birth date: _____ Grade in Sept '19: _____ School: _____

Name: _____ Birth date: _____ Grade in Sept '19: _____ School: _____

Number: _____ Exp. Date: _____ CCV #: _____

Please make checks payable to Camp Weekeela. Send to NJ address before June 5th. After to camp address.



Emergency Contact (other than parent): _____

Telephone Numbers: Home Phone: _____ Cell: _____

Relationship to participant: _____

<p>Off-season: 979 Allison Court Ridgewood, NJ 07450-2201 Phone: 201.612.5125 Fax: 201.612.9927</p>	<p>www.campweekeela.com info@campweekeela.com</p>	<p>Summer: 1750 Bear Pond Road Hartford, ME. 04220-5527 Phone: 207.224.7878 Fax: 207.224.7999</p>
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The Passion That Unites Us All!

ALUMNI WEEKEND FEES

The fee covers the costs to the participant and if applicable their child for basic registration, room and board, individual. Wekeela provides linens for registrants. The camp does not provide coverage of medical costs. Each participant must have medical/accident insurance as a prerequisite for registration for the Camp Wekeela Alumni Weekend.

METHODS OF PAYMENT

We honor current MasterCard and VISA credit cards, as well as payment by checks drawn on American banks only (or by travelers' cheques). We do not honor American Express card. The application provides space for supplying all necessary current charge card information. Be sure to include participant's name in all transactions. For wire transfer information please contact the Camp.

REFUNDS

Camp Wekeela reserves the right in its discretion to cancel registration if it deems cancellation to be in the best interests of the Camp or of the participant. I realize that no environment is risk-free and I am aware and have instructed my child (If applicable) on the importance of abiding by the Camp's rules. I agree (and if applicable, my child and I both) agree that my child is familiar with these rules and will obey them. I understand and agree to abide by the applicable pricing as noted on the enclosed registration form. The Director reserves the right to withdraw any camper whose influence or actions are deemed unsatisfactory to the Camp or who will not live within the rules and policies of the Camp. I agree that, if such expulsion occurs,

I will not be entitled to a refund or reduction of fees. I agree that, if I do not pay the fees as spelled out in this agreement, and according to the terms hereof, and it becomes necessary for Camp Wekeela to seek collection, I will be responsible for the payment of any additional costs for collection, including such reasonable legal fees and court costs as might be incurred. I also agree that, if MaineWekeelaCo, LLC, files any action against me arising out of this agreement, and if service of suit papers is made on me as hereafter provided, the courts of basic jurisdiction of Oxford County, Maine shall have personal jurisdiction over me, and Oxford County, Maine shall be a place or proper venue of any such action. If I am served with legal papers by certified mail, return receipt requested, or if such service is attempted and refused, and legal papers are then sent to me through the ordinary United States mail, that will constitute valid personal service upon me so as to confer personal jurisdiction over me.

If you withdraw your registration prior to April 15th, you will receive a full refund. **There are no refunds after April 16th.** Due to fixed costs and expenditures, no refunds or reductions can be made.

RESPONSIBILITY AND LIABILITY

I understand that part of the camping experience involves activities and group interactions that may be new to myself or my child, and that they come with uncertainties beyond what my child may be used to dealing with at home. Such risks include uneven terrain, standing and moving water, forested and other areas that may result in wildlife encounters including mammals, reptiles, insects and arachnids that could result in infections and various insect-or arachnid-transmitted diseases. I am also aware that my child may participate in off-campus activities that involve additional risks. In addition, there are certain unavoidable risks associated with various game and play activities such as collisions, wayward objects such as balls and other equipment and other risks. I am aware of these risks, and I am assuming them on behalf of myself and if applicable my child. I realize that no environment is risk-free, and I have instructed my child on the importance of abiding by the camp's rules, and my child and I both agree that he or she is familiar with these rules and will obey them.

I understand that there might be risks and dangers connected with some of the activities that are conducted at MaineWekeelaCo, LLC. However, I release MaineWekeelaCo, LLC and its Directors, staff and all employees from any legal actions or claims which the child or I, as parent or guardian, have, or might have, for any damage or injury to myself and/or my child or loss or damage of personal property as a result of being a participant at Camp Wekeela

Alumni Weekend or from participating in any activity that results in damage or injury to my child or loss or damage of personal property unless

caused by the negligence or willful misconduct of MaineWekeelaCo, LLC. I also give MaineWekeelaCo, LLC, permission to reproduce and publish and photograph, video or record any likeness of myself or of child for advertising and promotional purposes.

Any dispute concerning this contract, the brochure, or any other advertising materials concerning the program itself, will be resolved exclusively by arbitration in the State of Maine pursuant to the then current rules of the American Arbitration Association. Maine substantive law will apply to all issues concerning any such dispute.

MEDICAL AUTHORIZATION

In the event of an emergency, I hereby give permission to the physician selected by the Camp Wekeela Directors to hospitalize, secure proper treatment for, and or order

medications, injections, anesthesia, or surgery for myself. If applicable, in the event of an emergency, I am responsible for my child(ren).

