

Registration Form
Active Older Adults Camp
For campers at least 50 years young
August 27-31, 2017 (Sunday – Thursday)

Name _____ Date of Birth _____

Email Address _____

Cell Phone _____ Home Phone _____

Street Address _____

City _____ State _____ Zip _____

In Case of Emergency:

Contact _____ Relationship _____

Cell Phone _____ Home Phone _____

Senior Rate (65+) \$325

Non-Senior Rate \$345

Private Room \$175 additional

I would prefer:

1st floor room

2nd floor room

I need a handicap room

Please room me with _____

Due to limited space, if no roommate is requested, one may be assigned to you.

My Shirt Size: _____

Smoker Non-smoker

This will be my _____ year at Active Older Adults Camp

Please register me for the 2017 Active Older Adults Camp. I understand that the deposit of \$100 is non-refundable. I will receive a 75% refund of the balance paid if I cancel by August 1st. If I cancel after this date, no refund will be made. A detailed packet of information will be sent upon receipt of registration and deposit. *Call the camp office to make a payment with a credit card

Signature _____ Date _____

Mail: Camp Chief Ouray, PO Box 648, Granby, CO 80446

E-Mail: chiefouray@ymcarockies.org

Phone: 970-887-2648

Fax: 303-648-5949