

# Camp Notre Dame 2024 Overnight Camp Application

Print and complete this form. Mail with **\$190** deposit per camper to:

**CAMP NOTRE DAME  
PO BOX 74  
FAIRVIEW, PA 16415-0074**

You will receive an email confirmation upon receipt of this registration form and deposit.

## Camper Information:

Camper's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Age on Arrival: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

Parent Name(s): \_\_\_\_\_  
\_\_\_\_\_

Phone Number: ( \_\_\_\_ ) \_\_\_\_\_

Email (required): \_\_\_\_\_

To register additional campers, please complete, print, and mail a separate form for each camper.

## Overnight Camp Sessions:

Please select your preferred session(s):

\*Sessions begin on Sundays, all weeks open to 7-14 yr. olds

WEEK 1: JUNE 23 - 28

Older Camper (15-16 yr old)

### WEEK 2: NO OVERNIGHT CAMPING

WEEK 3: JULY 7 - 12

C.I.T. (17 yr old)

WEEK 4: JULY 14 - 19

C.I.T. (17 yr old)

WEEK 5: JULY 21- 26

Older Camper (15-16 yr old)

WEEK 6: JULY 28 - AUGUST 2

WEEK 7: AUGUST 4 - 9

## Cabin Assignments:

We will try to honor requests to bunk with friends.

Please write **two (2)** friends per cabin:

Friend Name: \_\_\_\_\_

Friend Name: \_\_\_\_\_

\*Our Summer Director assigns cabins based on each camper's age. If you would like your camper to be bunked with a friend or relative who is slightly older or younger, we may be able to accommodate your request.\*

## For the Record:

Child is a \_\_\_\_ first-time or \_\_\_\_ returning camper

How did you hear about Camp Notre Dame?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Camper Rates:

**\$390** first camper, first week

**\$300** additional camper in immediate family

**\$300** additional week per camper

**\$215** C.I.T. (covers entire cost)

## For Office Use Only:

Date Received: \_\_\_\_\_

Number of weeks attending: \_\_\_\_\_

Confirmed: \_\_\_\_\_

Total Fee: \_\_\_\_\_

Deposit: \_\_\_\_\_ Date: \_\_\_\_\_

Check Number: \_\_\_\_\_

Balance Due: \_\_\_\_\_ Date: \_\_\_\_\_

Check Number: \_\_\_\_\_