

Return by mail:

Camp Manitowa
P. O. Box 16613
St. Louis, MO 63105



**Summer 2019
Camp Registration**

Fax: 314-685-2368

or email:

dan@campmanitowa.com

Camper's Last Name: _____ First Name: _____ Middle Initial: _____

Age: _____ D.O.B.: ____ / ____ / ____ Gender: M F Grade Entering Fall 2019: _____

School: _____ Camper Email: _____

T-Shirt Size: Youth S - M - L - XL Adult S - M - L - XL

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone: (____) _____

Parent(s) are: Married | Divorced | Separated | Single | Widowed

Camper lives with: Mom | Dad | Both | Other _____

Parent/Guardian (1) Name: _____ Cell Phone: (____) _____

Home Phone: (____) _____ Work Phone: (____) _____

Email: _____

Address (only if different from camper mailing address): _____

City: _____ State: _____ Zip: _____

Parent/Guardian (2) Name: _____ Cell Phone: (____) _____

Home Phone: (____) _____ Work Phone: (____) _____

Email: _____

Address (only if different from camper mailing address): _____

City: _____ State: _____ Zip: _____

Has the camper attended a camp before? Yes No If yes, which camp? _____

Parent(s) attended camp? Yes - No If yes, which camp? _____

How did you hear about Camp Manitowa? _____

Medical / Release Information

By submitting this application, parent/guardian agrees to the following:

- Camp Manitowa may use any pictures or videos of camper for marketing purposes.
- Camp Manitowa may act or sign on my behalf in the event of a medical emergency.

Parent/Guardian Signature: _____ Date: ____ / ____ / ____

General Payment Information

- Deposit: \$200 (refundable up to 30 days from registration date).
- Full Payment due: May 1, 2019.
- Refund Policy: 1/2 payment refundable before June 1, 2019.
- Sibling Discount: \$100 off total amount due.
- Illinois hotel tax and usage fee \$14

Summer 2019 Session Dates

All sessions available for campers entering grades 2 - 9 in the fall of 2016. Smoky Mountain Trips are for rising 9th and 10th graders.

Please mark the sleep away camp session or sessions of your choice.

CAMP MANITOWA REND LAKE

Session I (2 weeks): June 10-June 23
Session IA (1 week): June 10-June 16
Session II (2 weeks): June 24-July 7
Session IIA (1 week) June 24-28
Session III (2 weeks): July 8-21
Session IIIA (1 week): July 8-14
Taste of Manitowa (1 week-50% off): July 29-August 4
Smoky Mountain Adventure Trip: June 17-23 & July 15-21

CAMP MANITOWA CEDAR POINT

Camp Nadav Jewish Camping:
Week Aleph: July 8-14
Week Bet: July 15-21
Week Gimel: July 22-28

Camp Cedar Point Girls Only Camp
July 28-Aug 2

Transportation Fees

- Transportation fees of \$30 one way by chartered bus from St. Louis \$30
 Transportation fees of \$60 round trip by chartered bus from St. Louis \$60 (non-refundable)

Payment Information

Please enclose check or fill out credit card info for our files.

Please enclose check or fill out credit card info for our files.

- Full payment included with registration.
 \$200 deposit included, balance due by May 1.
 \$200 deposit included, paid monthly by credit card. Please fill out credit card info for our files.*
 I'd like to contribute to the Camp Manitowa Scholarship Fund
(Make separate check out specifically to "Camp Manitowa Scholarship Fund". Not tax deductible)

Credit Card Information

Visa MasterCard Discover American Express

Amount to be charged: \$ _____

Amount to be donated to Camp Manitowa Scholarship Fund \$ _____

* If paying monthly: Please charge my credit card on the day of each month for \$ _____.

* Name as it appears on card: _____

Card Number: _____ - _____ - _____ - _____

Expiration Date: _____ Sec Code (on back): _____

Signature: _____

Or mail a check and this complete form to:

Dan Grabel | Camp Manitowa | P. O. Box 16613 | St. Louis, MO 63105

Winter: PO Box 16613 | St. Louis, MO 63105 | Summer: 12770 North Benton Rd | Benton, IL 62812
w: campmanitowa.com | p: 314-375-6766 | f: 314-685-2368 | e: dan@campmanitowa.com