



Family Name: \_\_\_\_\_

**Family Camp Application**  
**February 22-24, 2019**  
**Solomon Episcopal Conference Center**

**Directions:** Complete and return with the registration fee to the Camp Bon Coeur office: 300 Ridge Rd. Suite K, Lafayette, LA 70506

**Family Information**

\_\_\_\_\_  
Family Name Number of People Attending

\_\_\_\_\_  
Address City State Zip Home Phone #

\_\_\_\_\_  
Email Address

**Parent/Legal Guardian Information** *Please indicate the Legal Guardian(s) with an \* in front of the name*

\_\_\_\_\_  
Parent/Legal Guardian's Name #1 Age

\_\_\_\_\_  
Address (if different from above) Best Contact Number

\_\_\_\_\_  
Parent/Legal Guardian's Name #2 Age

\_\_\_\_\_  
Address (if different from above) Best Contact Number

\_\_\_\_\_  
Heart Camper Age

\_\_\_\_\_  
Diagnosis

\_\_\_\_\_  
Additional Camper #1 Age

\_\_\_\_\_  
Additional Camper #2 Age

\_\_\_\_\_  
Additional Camper #3 Age

Family Name: \_\_\_\_\_

**Tee Shirt Size** *Please check sizes and indicate how many of each*

- Youth Small (Qty: \_\_\_\_\_)       Youth Medium (Qty: \_\_\_\_\_)       Adult Small (Qty: \_\_\_\_\_)  
 Adult Medium (Qty: \_\_\_\_\_)       Adult Large (Qty: \_\_\_\_\_)       Adult X-Large (Qty: \_\_\_\_\_)

## Family Camp Fees

Thanks to a grant from the Dorothy Dorsett Brown Foundation, we are able to offer Family Camp at a HUGE discount. Registration fees are \$75 per individual / \$150 per family.

We expect family camp to fill up early this year so please be sure to contact us ASAP to save your space. There is a \$50 non-refundable deposit that is due when you register that is applied to your camp fees. **Please ensure all payments are received no later than January 31, 2019.** Payments received after the deadline will be subject to a \$25 late fee that may not be applied toward camp fees.

## Camp Living

Lodge accommodations are similar to hotel-type rooms with a private bathtub, shower, and toilet. Linens and bedding are provided.

## Parent and Adult CHD Camper Agreement

I understand all deposits are non-refundable. All fees are due by January 31, 2019. Payments received after the deadline will be subject to a \$25 late fee that may not be applied toward camp fees.

I give my permission for me, my child/children and family to participate in all activities as they pertain to his/her camp program (including out of camp trips or to secure medical care). I release Camp Bon Coeur and all of their employees or agents from any and all liability for use of any image generated which includes any member of my family or myself for public relations purposes including but not limited to, articles, brochures, videos, TV, Internet, newspaper, and magazine advertisements, Internet images, and all other Internet and website usage. I accept full responsibility for all incurred camp fees and expenses. I agree to assume all financial responsibility for any medical attention needed by my child and otherwise not covered by my insurance.

Names of those adults to whom release of the camper has been authorized by the parent or legal guardian:

\_\_\_\_\_

I give permission for the above-named person/persons to be released to either parent listed above or to the following person at the close of camp:

\_\_\_\_\_

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date