



APPLICATION MUST BE COMPLETED BY PARENT OR GUARDIAN

APPLICATION FOR ENROLLMENT 2012 FOR BOYS AND GIRLS AGES 7 - 17

OZARK SELECT - Circle the Desired Session(s):

1st Session June 3 - June 16 2nd Session June 17 - June 30 3rd Session July 1 - July 14 4th Session July 15 - July 28 5th Session July 29 - Aug. 11 7th Session *Wakeboard Camp Aug. 12 - Aug. 17

OZARK EXPRESS - Circle the Desired Session(s):

Session A June 3 - June 9 Session B June 10 - June 16 Session C July 1 - July 7 Session D July 8 - July 14 Session E July 29 - Aug. 4 Session F Aug. 5 - Aug. 11

OZARK MAX - Circle the Desired Session(s):

Session G June 10 - June 30 Session H June 17 - July 7 Session I July 8 - July 28 Session J July 15 - Aug. 4

Date _____ Check One: [] Boy [] Girl
Please Enroll _____ Name Used _____
Home Address _____ Telephone (____) _____
City, State & Zip _____
Parent Email 1 _____ Parent Email 2 _____

[] Check this box if you do not wish your address and/or phone number to be given to other camp families upon request.

Address to receive Camp correspondence _____

Age at Camp in 2012 _____ Birthdate _____ - _____ - _____ School Grade for 2011/2012 _____
Returning campers circle previous Tribe: Caddo Osage This will be my _____ year as an Ozark Camper
New campers circle sibling's Tribe (as appropriate): Caddo Osage Uniform Size (Circle one):
Youth Sizes Adult Sizes
Shirt: YM YL S M L XL
Shorts: YM YL S M L XL
Name of School _____
Information in this box is VERY IMPORTANT!!!! MUST HAVE FOR CABIN PLACEMENTS!!!! Double check for accuracy.

Camper's Present Height _____ Weight _____
Mother's Name _____ Occupation _____
Home Address _____
Home Phone (____) _____ Business Phone (____) _____ Mobile Phone (____) _____
Father's Name _____ Occupation _____
Home Address _____
Home Phone (____) _____ Business Phone (____) _____ Mobile Phone (____) _____
Home Physician _____ Phone (____) _____
How did you become interested in Camp Ozark? _____

Tuition for each Ozark Select session is \$2,395.00. Tuition for each Ozark Express session is \$1,295.00. Tuition for each Ozark Max session is \$3,690.00. The tuition for all sessions includes a \$225 deposit/registration fee per session. The \$200 deposit is refundable until February 1, 2012. After February 1, 2012, the deposit is non-refundable and non-transferable in the event of cancellation for any reason. The \$25.00 registration fee is non-refundable.

Tuition fee includes camp activities, Camp Ozark uniform, cabin photo and regular arts and crafts activities. No extra money is needed except for personal items at the camp store and extra arts and crafts activities. (\$150 is suggested for an Ozark Select session and \$100 for an Ozark Express session.)

- Check Box(es): [] Full payment accompanies this application
[] A deposit and registration fee of \$225 accompanies this application
[] Please add \$250 to the tuition fee to purchase an inscribed brick in the "FIT" Brick Plaza to be used as a donation to the Camp Ozark "FIT" Scholarship Program.

Checks should be made payable and mailed to: CAMP OZARK
155 CAMP OZARK DRIVE
MOUNT IDA, AR 71957
http://www.campozark.com

Please complete back page.

Are there any activities in which this camper should **NOT** participate?

Has this camper ever been diagnosed or treated for any emotional, psychological, mental, behavioral, or chemical condition or disorder?

Yes No If yes, please explain.

Does this camper ever exhibit any physical, mental, emotional, psychological or behavioral trait that could prevent him from living cooperatively with others? Yes No If yes, please explain. **NOTE:** Full disclosure of the above information is required. The existence of a "limiting" condition does not necessarily exclude a child from acceptance into the Ozark program, however, a failure to disclose such a condition will result in automatic dismissal of the camper with no refund of tuition once the condition is brought to light.

Cabin-mate requests: Requests will be considered when made by BOTH campers concerned and ages are within 12 months of each other. Only two requests, please!

1st _____ 2nd _____

Names and ages of brothers and sisters:

ADDITIONAL COMMENTS: Please tell us anything that will help us insure the very best experience possible for your child, including any personality traits, limitations or characteristics of this camper which should help the counselor in working with your child or that would be helpful in assigning cabins and activities (include such things as personality traits, sunburn sensitivity, sleepwalking, hyperactivity, bedwetting, etc.).

If parents cannot be reached in an emergency, please list the person to be contacted. (It is the policy of Camp Ozark to notify parents in the event of an accident or injury only in the event of emergency or when recommended by the Camp Physician.)

Name _____ **Relationship to Camper** _____

Address _____

Telephone _____

List below the names of any friends, relatives or acquaintances who might be interested in attending Camp Ozark now or in the future.

Name Address/City/State/Zip Code Email Address

Name Address/City/State/Zip Code Email Address

Name Address/City/State/Zip Code Email Address

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