



Camp Cancellation / Change Form

Participant Name: _____ Type of Camp: _____

Current Camp Session Name/Date: _____ Today's Date: _____

Choose Type of Change: **\$25.00 Each**

Choose Type of Change: **No Charge**

- Buddy Request or Change Transportation Change/Addition
- Session/Week Addition

Cancellation Request: **(Deposit is Non-Refundable)**
Please call to discuss other session options!

- Cancellation

Describe Changes/Cancellation Required:
 Please provide details

Parent Name _____

Address _____

City, State, Zip _____

Email Address _____

Phone _____

By signing below, I am authorizing the changes or cancellations indicated above and agree to pay for any fees associated with change.

X _____
 Parent / Guardian
 Signature

Payment information: Check Enclosed Credit Card: **Visa MasterCard Discover American Express**

Card Holder Name: _____ Card Number _____ Exp. Date _____

I agree to pay above total amount according to card issuer agreement. **X** _____

For safety and quality of program, all changes must be received by Monday, one week prior to camp session week. Changes received after may not be accommodated. Thank you!