

2010 CAMP ROCKMONT FOR BOYS

375 Lake Eden Road * Black Mountain, NC 28711 * Phone: 828-686-3885
 Fax: 828-686-7332 * web: www.rockmont.com / e-mail: info@rockmont.com

- Camper** ages 6 to 16
 Ranger ages 13 to 16 B1, B2 or C
 Counselor in Training (CIT) Should be at least 16 years old



Camper Information (Please Print)

Boy's Name (In full) _____ Friends call him _____
 Home Address _____ Height _____ Weight _____
 City _____ State Zip _____
 Camper E-mail Address _____ Age as of June 1, 2010 _____
 Date of Birth _____ School Attending _____ Current School Grade _____
 Church Member Yes No Denomination _____
 Resident Camp Last Attended _____ No. of Years _____ Last Cabin #
 Name and Age of Brother(s) _____ Sister(s) _____ @ Rockmont

Check Desired Camp Session Below - All sessions open on a Sunday and end on a Friday. A charge of \$150 per day must be assessed for early arrivals or late departures and prior Director approval is necessary. Combination sessions are also allowed with prior approval.

If I am accepted, I promise to conform to the rules and regulations of Camp Rockmont for Boys and show a spirit of loyalty to and cooperation with the camp authorities.

Camper Signature _____

- A 20-Day Session - June 6-June 25**
 \$3550 Campers (completed grade 5 or higher)
 \$1940 CIT's
- A1 6-Day Starter Camp - June 6-June 11**
 \$1050 Campers (completed grade K-4 only)
- A2 13-Day Session - June 13-June 25**
 \$2500 Campers (completed grade 1 or higher)
 \$1290 CIT's
- B 27-Day Session - June 27-July 23**
 \$4550 Campers (completed grade 5 or higher)
- B1 13-Day Session - June 27-July 9**
 \$2500 Campers (completed grade 1 or higher)
 \$1290 CIT's \$2500 for Rangers
- B2 13-Day Session - July 11-July 23**
 \$2500 Campers (completed grade 1 or higher)
 \$1290 CIT's \$2500 for Rangers
- C 13-Day Session - July 25 - August 6**
 \$2500 Campers (completed grade 1 or higher)
 \$1290 CIT's \$2500 for Rangers
- C1 6-Day Starter Camp - July 25-July 30**
 \$1050 Campers (completed grade K-4 only)

Parent Information (Please Print)

Father's Name (Dr. / Mr.) _____
 Home Phone _____ Father's Cell _____
 Occupation _____ Business Phone _____
 Father's E-mail Address _____
 Mother's Name (Dr. / Mrs.) _____
 Home Phone _____ Mother's Cell _____
 Occupation _____ Business Phone _____
 Mother's E-mail Address _____
 With whom should we correspond? _____
 Are parents divorced or legally separated? Yes No
 With whom does the child live? _____
 Health Insurance Co. _____ Policy # _____
 Address of Insurance Co. _____

PARENT AGREEMENT:

I certify that my son is fully capable of participating in camp activities. I understand my son may have the opportunity to participate in a special trip option (Campout, Kayaking, Rock Climbing, Canoeing) at no additional cost. I understand that there is a certain degree of risk and possible injury related to the camp activities. I assume full responsibility for my child for bodily injury and loss of personal property and expenses thereof as a result of those inherent risks and of his negligence in participating in camp activities. In the event that I cannot be reached in an emergency, I hereby give permission to the physician selected by the Camp Director to hospitalize, secure proper treatment for and order injection, anesthesia, or surgery for my child as named above. I also give permission for photographs or video footage of my son to be used by the camp for promotional purposes.

Parent/Guardian Signature _____ Date _____

\$500 Deposit plus payment for all extras is due with application

Refundable until April 1, less \$100 processing fee. No refund after April 1.

Check Desired Extras

Not applicable for A1/C1 Campers, Rangers or CIT's.

- Trap Shooting** (must be 13 or older)
 13 Days (\$100)
 20 Days (\$125)
 27 Days (\$150)
- Horseback Skill** (must be 9 or older)
 13 Days (\$150)
 20 Days (\$200)
 27 Days (\$250)
- Half-Day Horseback Trail Ride** (\$100)
 Limit 1 per 13 day session
- One-Day Ski Trip to Lake James** (\$125)
 Limit 1 per 13 day session - must be 10 or older
- One-Day Whitewater Raft Trip** (\$125)
 Limit 1 per 13 day session - must be 8 or older

Please attach a recent photograph

For Office Use
 Adv/Dep\$ _____ CHK# _____ RCVD. _____ Registered
 Acknowledged

2010 Camp Rockmont Optional Information

Cabinmate Requests (Please Print)

Cabinmate Requests can be honored for up to two campers if:

- 1.) The request is received before May 1st.
- 2.) Both campers' parents agree on the request.
- 3.) Campers' ages and grade are approximately the same.

Friend's Name _____ Friend's Age _____ Grade _____ Session _____

Friend's Name _____ Friend's Age _____ Grade _____ Session _____

List any negative request if there is such. Name _____ Age _____

Name _____ Age _____

Special Information (Please Print)

From whom did you first learn of Camp Rockmont? (Please be specific)

I Selected Camp Rockmont because... _____

Prospect Information (Please Print)

The following friends of mine might be interested in Rockmont for their son:

Parent's Name	Street Address / P.O. Box	City/State	Zip	Boy's Name/Age
---------------	---------------------------	------------	-----	----------------
