

## Registration Form

New Culture Institute, Inc. (NCI) and NFNC offers a sliding scale. The low end of the scale represents our basic cost, while the top end represents the price one might expect to pay for a typical event of this nature. Any money received above and beyond our basic cost will go towards a scholarship fund for lower income individuals and the improvement of this and future Summer Camps. We trust that you will pay as high on the scale as you are able

- ☐ Complete 14 day package - August 4 - 18

Before 6/15 - \$500 - \$1,000

Through 7/15 - \$600 - \$1,000

After 7/15 - \$700 - \$1,000

Amount: \$ \_\_\_\_\_

- ☐ First Week Only . August 4 - 11

Before 6/15 . \$375 - \$750

Through 7/15 - \$425 - \$750

After 7/15 - \$475 - \$750

Amount: \$ \_\_\_\_\_

# \_\_\_\_\_ Children 0-3 years - Free (no childcare provided)

# \_\_\_\_\_ Children 4-12 @ \$100.00 each = \$ \_\_\_\_\_

# \_\_\_\_\_ Children 13-17 @ \$150.00 each = \$ \_\_\_\_\_

- ☐ Requested Scholarship\*: \$ \_\_\_\_\_

(see footnote below)

Total Amount enclosed: \$ \_\_\_\_\_

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

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ DOB: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Emergency contact: \_\_\_\_\_

Phone: \_\_\_\_\_

Minors: \_\_\_\_\_ DOB: \_\_\_\_\_

\_\_\_\_\_ DOB: \_\_\_\_\_

\*For those with limited financial resources, inquire about a scholarship (no work exchange) by emailing us at [sc07w@nfnc.org](mailto:sc07w@nfnc.org). Be sure to include "SC scholarships" in the subject header.

**Turn over to complete registration form.**

## WAIVER RELEASE FORM

I understand that Summer Camp will offer a variety of activities that can be physically, mentally, and emotionally challenging. The level of my participation in any of the activities is at all times completely my choice. I may stop or say "no" at any time. In the event of an emergency, I give the Summer Camp 2007 staff permission to call an ambulance or physician. I release the Summer Camp staff, NFNC, NCI, and anyone affiliated with Trillium Farm from all liability for any injury to me resulting from my participation. This release also applies to the minors listed on the registration form for whom I am responsible.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

(must be at least 18 years of age)

Dietary Preferences - ☐Vegan ☐Raw ☐Low Carb ☐Allergies  
Comments: \_\_\_\_\_

Contact Sheet - This year we intend to create a photo contact sheet that will later be sent to all campers. Please indicate those items you do not want to appear on the contact sheet. Otherwise, your information will be sent to all SC'07 campers.

Do not include: Photo Name Address Email Phone

For me: ☐ ☐ ☐ ☐ ☐

For my children: ☐ ☐ ☐ ☐ ☐

2007 Camper E-List - Meet campers and get news before camp starts! Please subscribe me to this list: ☐

The format of camp necessitates participation by campers. There will be opportunities for leadership. Do you have leadership skills or experience in any of the following areas?

- |   |  |
|---|--|
| <input type="checkbox"/> Kitchen prep       | <input type="checkbox"/> Kitchen cleanup               |
| <input type="checkbox"/> Teen Mentorship    | <input type="checkbox"/> Computer Internet             |
| <input type="checkbox"/> Housekeeping       | <input type="checkbox"/> Recycling                     |
| <input type="checkbox"/> Lead Cook/Catering | <input type="checkbox"/> Photographer                  |
| <input type="checkbox"/> Compassion Cadre   | <input type="checkbox"/> Children's Program/Child Care |
| <input type="checkbox"/> Other: _____       |  |

Send to:

Summer Camp Registrar  
PO Box 10703  
Eugene, OR 97440

A packet will be mailed to you by mid-July with a map and directions, and last minute news. Either fly into Portland (295mi) or Medford (25mi).

**[sc07w@nfnc.org](mailto:sc07w@nfnc.org) or 800-624-8445**

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