

Enrollment Form

CAMPER INFORMATION

Camper's Full Name _____

Name camper prefers _____ Date of Birth / / _____

Camper's School _____ Current Grade _____

Camper's Street _____ City _____ State _____ Zip _____

Home Phone _____

How did you hear about Lochearn? _____

T-Shirt Size: YS YM YL AS AM AL AXL

NON-LOCHEARN SIBLING INFORMATION

Sibling's Name _____ Age _____ Camp Currently Attending _____ Girl Boy

Sibling's Name _____ Age _____ Camp Currently Attending _____ Girl Boy

PARENT INFORMATION

Parents: Sole parent Live together Live separately Divorced

Child lives with: Both Parent 1 Parent 2

Parent 1 Name _____

Employer _____ Position/Title _____

Business Phone _____ Cell Phone _____

Email _____

Home Address Same as camper

Street _____ City _____ State _____ Zip _____

Parent 2 Name _____

Employer _____ Position/Title _____

Business Phone _____ Cell Phone _____

Email _____

Home Address Same as camper

Street _____ City _____ State _____ Zip _____

Should duplicate mailings be sent to: Parent 1 Parent 2

ENROLL MY CHILD FOR:

First Session Second Session Both Sessions

RIDING:

Provided on a first come, first served basis. Please check your daughter's reservation for riding below.

Does not plan to ride Every other program day Every program day

Please keep a copy of this form, front and back, for your records



PAYMENT

Payment Amount \$ _____ (\$1,000 deposit min.)

Check: Make Payable to Lochearn Camp

Credit Card:

Please provide the requested information and sign below to authorize Camp Lochearn to charge your credit card.

Credit Card Authorization:

I authorize Lochearn Camp, LLC to charge the credit card listed below for the payments listed below.

- Charge this card for the \$1,000 deposit.
- Charge this card for the \$1,000 Deposit now and then automatically charge this card for the \$2,500 payment due on February 1 and the remaining balance due on April 1.
- Charge this card for the full tuition due – including Deposit.
- Charge this card for other amount: \$ _____

Card No. _____

Exp. Date _____ Security Code _____

Billing Address _____

City _____

State _____ Zip _____

Cardholder Name (print) _____

Signature _____

Date _____

I have read, understand and agree to terms and conditions set forth on BOTH sides of this Enrollment Application.

Signature of Parent or Guardian _____

Date _____

CampLochearn.com

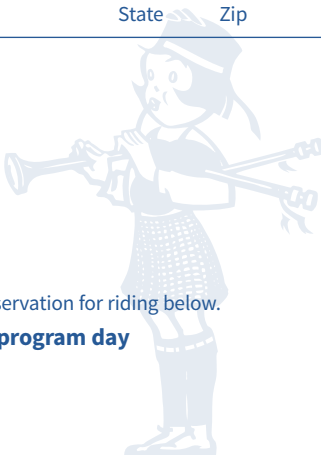
SUMMER

PO Box 44, 1061 Robinson Hill Rd.
Post Mills, Vermont 05058
802-333-4211 (phone) 802-333-4856 (fax)

WINTER

PO Box 358376, Gainesville, Florida 32635
802-333-4211 (phone)

fun@camplochearn.com



ENROLLMENT TERMS AND CONDITIONS

1. Camp Lochearn is operated solely by Lochearn Camp, LLC, (herein after collectively referred to as "Camp"). The camper ("Camper") and both Parents/Guardians ("Parents") agree to abide by all of the rules and regulations established by the Camp and Camp Directors ("Director") including without limitation, those relating to enrollment, withdrawal and dismissal of Campers.
2. My child has permission to participate in all camp programs, camp trips and special outings planned and supervised by Camp Lochearn. Parent understands that hikes and trips away from Camp are an integral part of the Camp program and gives permission to the Camp to take Camper out of Camp to participate in these programs.
3. The Camp reserves the right to dismiss, at its sole discretion, any Camper whose condition, conduct, influence or behavior is deemed unsatisfactory or detrimental to the best interest of the Camp or her fellow campers or who will not live within the rules and policies of the Camp. If dismissal occurs, no reduction or return of fee, or any part thereof, will be made.
4. I understand that part of the camping experience involves activities and group living arrangements that may be new to my child, and that they come with certain risks and uncertainties beyond what my child may be used to dealing with at home. I am aware of these risks and I am assuming them on behalf of my child. I realize that no environment is risk-free, and I have instructed my child on the importance of abiding by the Camp's rules. My child and I both agree that she is familiar with these rules and will obey them.
5. Routine medical care is provided by the Health Center and is included in the tuition. As the Parent and/or Guardian, I authorize any physician, nurse or other health care provider to communicate with the medical staff and/or Director, about my child's medical condition, treatment and/or prognosis. I further authorize the Camp to discuss any medical conditions with medical staff outside the Camp when the Camp believes such communication to be in the best interest of the Camper. Should it be necessary for the well-being of the Camper to use outside medical care, or if any special medications must be ordered, all expenses involved will be paid by Parent. Accidents occurring during the Camper's attendance at Lochearn will be paid by Camp's accident policy up to the accident insurance policy limits and then turned over to the Parent's health insurance policy.
6. In the event I cannot be reached in an emergency when my child is under Camp Lochearn's supervision, or in the sole opinion of the Camp there is insufficient time due to the nature of the injury, I hereby give permission to the physician selected by the Director to hospitalize, secure proper treatment for, and to order injections, anesthesia, or surgery for my child. If I am available, I understand that Lochearn will always contact me before doing so.
7. Parent must inform the Director prior to registration if Camper has received professional counseling or medication for behavioral modification during the last 12 months. Parent must also inform Director immediately if such care or medication occurs after registration and prior to the camp season. Failure to so inform Director may lead to dismissal of Camper from Camp, and in the event of such dismissal, there will be no refund.
8. Due to fixed costs and expenditures based on definite enrollment, no refund or reduction can be made for arriving late or leaving early. An exception is made in the case of illness or injury requiring the attention of a physician at home. In that case, one-half of the fee for the remaining season will be refunded.
9. Permission is hereby given for the Camp to use photographs, video images, digital images and audio or likenesses of Camper in its brochures, website and all promotional material. This permission also includes music, art, written materials, statements created by Camper or originating from Camp or from a Camp related activity.
10. The Camp is not responsible for Camper's articles of clothing or personal belongings lost or damaged by fire, theft, laundry, etc. It is highly recommended that campers do not bring valuable items such as expensive clothing, jewelry or electronics to Camp.
11. Tipping of staff, in any form, is prohibited.
12. If tuition or fees are not paid in full for Camper, Parent will be liable for all costs of collection, including attorney's fees.
13. Camper and Parent expressly agree that the provisions contained within the Terms and Conditions portion of this agreement are intended to be as broad and inclusive as permitted by the applicable law and that if any portion of the Terms and Conditions are held invalid, it is agreed that the balance of the agreement, including the remaining Terms and Conditions, shall, notwithstanding, continue in full force and effect.
14. I/we affirm that this agreement supersedes any and all previous oral or written promises or agreement. I understand that is the entire agreement between the parties and cannot be modified or changed in any way by the representatives or statements made by any agent or employee of Camp. This agreement may only be amended by a written document duly executed by all parties.
15. Any dispute concerning this contract, the brochure, the website, or any other advertising materials concerning the Camp must be brought only in and for courts in the State of Vermont to the exclusion of litigation anywhere else in the world.

PAYMENT AND CANCELLATION POLICY

Registration and Tuition Fees

A \$1,000 deposit is due with the enrollment form (which includes a \$500 non-refundable registration fee). A \$2,500 payment is due by February 1st. The final balance is due by April 1st. There will be a \$100 late fee for all payments received after April 1st and a \$200 late fee for all payments received after May 1st.

Discounts

There is a \$250 tuition discount for the second (and each additional) sister enrolled.

There is a \$300 tuition discount for payment in full before November 1st.

There is a 10% reduction if attending both sessions.

Withdrawal and Refund Policy

If you withdraw your child prior to December 15th, you will receive a full refund, less the \$500 registration fee.

If you withdraw your child after December 15th but prior to February 1st, you will receive a refund of payments made up to that date, less the \$500 registration fee and an additional \$500 administrative fee.

There are no refunds after February 1st.