

2008 Individual Application

Michigan Out-of-Doors™ Camp for Kids

Cedar Lake Camp

Camper Name _____ Boy Girl

Age _____ Date of Birth ____/____/____ Grade _____

Parent or Guardian Name(s) _____

Address _____

CITY STATE ZIP

Contact Numbers: Home (____) Work (____)

Cell (____) Email _____

WE DESIGNATE THE FOLLOWING WEEK FOR THE CAMPER WE ARE SENDING TO CAMP:
(Please indicate a 1st and 2nd choice for the camper.)

	FIRST CHOICE	SECOND CHOICE
Week 1 June 8-13Mixed Camp (Ages 9-15)	<input type="checkbox"/>	<input type="checkbox"/>
Week 2 <i>Reserved for Safari Club International-Novi Chapter</i> June 15-20 ..Regular Camp (Ages 12-15)	<input type="checkbox"/>	<input type="checkbox"/>
Week 3 June 22-27Junior Camp (Ages 9-11)	<input type="checkbox"/>	<input type="checkbox"/>
Week 4 June 29-July 4CAMP CLOSED		
Week 5 July 6-11Regular/Advanced Camp (Ages 12*-15/13-16)	<input type="checkbox"/>	<input type="checkbox"/>
Week 6 July 13-18Junior Camp (Ages 9-11)	<input type="checkbox"/>	<input type="checkbox"/>
Week 7 July 20-25Mixed Camp (Ages 9-15)	<input type="checkbox"/>	<input type="checkbox"/>
Week 8 July 27-Aug 1Junior Camp (Ages 9-11)	<input type="checkbox"/>	<input type="checkbox"/>
Week 9 Aug 3-8Mixed Camp (Ages 9-15)	<input type="checkbox"/>	<input type="checkbox"/>

*Campers age 12 that have completed 7th grade attend regular camp. Campers age 12 that have completed 6th grade attend junior camp.
 **Advanced (13-16) with previous MUCC Camp experience or hunter's safety card.

NOTE: Registrations are accepted on a **FIRST-COME, FIRST-SERVED BASIS**. To be assured of your first choice of weeks, please get your reservations in early. **Partial payments are required**. Final payment is due by May 1, 2008.

DROP OFF TIME IS SUNDAY, 4-5 PM. PICK-UP TIME IS FRIDAY, 12:30 PM.

PLEASE NOTE:
 To apply for Week 2 sponsored by Safari Club International go to www.scinovi.com. Applicants will be selected by SCI to receive a paid scholarship.

REGULAR AND JUNIOR CAMP FEE: \$360 • ADVANCED CAMP FEE: \$400
 Enclosed is our: partial \$180 reg. & jr. \$200 adv. or Complete payment of \$360 \$400
 Check enclosed (payable to MUCC) VISA MasterCard Discover

Card No. _____ Exp. Date _____

Signature _____

Please charge the remaining balance to this credit card on May 1st, 2008.

Please accept my additional tax-deductible contribution of \$ _____ to the MUCC
 General Fund Legal Defense Fund Endowment Fund Camp for Kids Fund

NO REFUND will be given for cancellations less than two weeks prior to camper's scheduled week. In addition, there is a **\$50.00 non-refundable fee** under any circumstances.

Support our efforts to conserve Michigan's natural resources by remembering MUCC in your contributions and planned giving.

MAIL TO:
Michigan Out-of-Doors™ Camp for Kids
P.O. Box 30235 • Lansing, MI 48909-7735
Phone: 517.346.6465 FAX: 517.371.1505
email: education@mucc.org

(FOR MUCC USE ONLY)

CHECK NUMBER _____ DATE RECEIVED _____ AMOUNT _____