



UPWARD BOUND CAMP

2018 CAMPER REGISTRATION

P.O. Box C, Stayton OR 97383
Phone (503) 897-2447 Fax (503) 897-4116

OFFICE USE ONLY	
Received by: _____	
Date received: _____	
Payment received: Y N	
Receipt No.: _____	
Brokerage: Y N	
SA Status: _____	

*This confidential registration must be completed in FULL by all campers.
Incomplete applications will be returned and may delay processing for available spots.*

**AS OF APRIL 1, 2018 PRIVATE PAY CAMPER FEES ARE REQUIRED IN FULL
AT TIME OF REGISTRATION TO GUARANTEE REGISTRATION.**

*Partial scholarships are available depending on need & availability of funding.
Additional application is required for scholarships/camperships.
Please contact the office for more info on campership applications.
Sending in this registration form does not guarantee camper placement.*

PLEASE ALLOW A MINIMUM OF 2 WEEKS FOR REGISTRATION PROCESSING.

CAMPER INFORMATION

Please select one: New Camper Returning Camper

Registration correspondence should be sent to address of: Camper Guardian Group Home

Camper's Full Name: _____ Birth Date: _____ MM/DD/YYYY

Address: _____ City: _____ State: _____ Zip: _____

County of Residence: _____ Phone: _____ Email: _____

Gender of Camper (check one): Male Female Other

Camper T-Shirt Size (check one): S M L XL 2X 3X

Bunk Space Requested (check one): Tent Bottom Indoor Bottom Indoor Top Brings Own Tent

Referral Source: Web Friend Easter Seals Fair/Expo DD Services

UBC Event Other: _____

PARENT/GUARDIAN INFORMATION

Would you like to subscribe to our e-newsletter?

Yes Please No Thank you

Is camper own guardian? Y N (If YES skip)

Guardian

First Name: _____ Last Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell #: _____ Work #: _____

Email: _____ Contact Preference: Phone Email US Mail

Joint Guardian

First Name: _____ Last Name: _____ Relationship: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell #: _____ Work #: _____

Email: _____ Contact Preference: Phone Email US Mail

If parents are divorced, who has custody during camper's time at camp? _____

INSURANCE INFORMATION

Insurance: _____ Policy #: _____ Group #: _____

Medicare #: _____ Medicaid #: _____ SSN #: _____

EMERGENCY CONTACT INFORMATION

In case of emergency, the guardian will be contacted first. Please list 2 different emergency contacts in case the primary contact is not immediately available. These individuals **MUST** know the applicant **AND** have permission to pick up applicant at camp if needed.

Name: _____ Phone: _____ Relationship: _____

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REGISTRATION INFORMATION

PAYMENT INFORMATION

How will you pay for Camp? Self-Pay Brokerage County DDS
 Other (specify): _____

Agency Name: _____ Agency Contact: _____
 Agency Phone: _____ Agency Email: _____
 Agency Fax: _____ Agency Address: _____

Name of person completing this form: _____ Phone #: _____

Length of time you have known the camper?: _____ Number of anticipating sessions attending: _____

Please Number Your Top Choices using 1 as your first choice, 2 & 3.

	June 20-23		July 23-26 *Horses		August 20-24 *Horses
	June 25-29 *Horses		August 1-4		October 26-29 *Harvest Camp
	July 2-6 *Horses		August 6-10 *Horses		November 21-25 *Thanksgiving/Civil War Camp
	July 22-26 *Horses		August 13-17 *Horses		December 24-26 *Christmas Camp

Camper's favorite activity at home: _____

Favorite activity away from home: _____

Other camps camper has or will attend: _____

How do you know the camper wants to attend UBC? _____

We want you to see your friends at UBC. Is there someone you would prefer to be schedule to attend the same time with?

Are there any obstacles to scheduling we should be aware of (i.e. personal conflicts w/ other attendees, home sickness, fears, etc.)?

Please check all that apply:

Camper may participate in Swimming Y N Camper may participate in Wading Y N

Camper may participate in Boating Y N Camper may participate in Archery Y N

Camper may participate in Horseback Riding (*Not offered at all sessions*). Y N

General Comments/Expectations/Questions/Concerns with regards to Camp Activities: