



Lion Max Simms Memorial Camp
 PO BOX 760
 Bishop's Falls NL A0H 1C0
 Phone: (709) 258-5862 Fax: (709) 258-5243
 Toll Free: 1-888-MAX CAMP (1-888-629-2267)
 Email: max.camp@xplornet.com



Camp-A-Rama 2018

July 13-15

CAMP-A-RAMA REGISTRATION
Application Deadline: July 6, 2018

Name	_____		
Address	_____		
Phone #	_____	Lions Club:	_____
Children's Names:	_____	Ages:	_____
	_____		_____
	_____		_____

Registration Fees	PLEASE READ & SIGN PHOTO WAIVER AND SUBMIT WITH APPLICATION
****Please PROVIDE your own personal bedding****	
Accommodations & Meals \$40.00 per person per day/night FOR EITHER CAMP ACCOMODATIONS OR RV/TRAILER	

ACCOMMODATIONS	
CAMP	<input type="checkbox"/> _____ (CHECK ONE)
RV/TRAILER	<input type="checkbox"/> _____
Friday	# PEOPLE _____ X \$40 = \$ _____
Saturday	# PEOPLE _____ X \$40 = \$ _____
BBQ Saturday Supper	#Steaks _____ X \$10 = \$ _____
	#Chicken _____ X \$8 = \$ _____
TOTAL	\$ _____

PLEASE NOTE:

IF YOU SUBMIT AN APPLICATION FOR CAMP-A-RAMA AND YOUR PLANS CHANGE, PLEASE CONTACT THE CAMP TO CANCEL. ACCOMMODATIONS WILL BE MADE AVAILABLE FOR OTHERS WAITING TO ATTEND CAMP-A-RAMA. THANK YOU!

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All programs are funded through generous donations from Lion, Lioness and Leo Clubs, individuals, service clubs, business, government grants, and foundations. Without these donations we would not be able to offer high quality, fully accessible, recreational programs.

Photo Waiver / Release

The Lion Max Simms Memorial Camp uses photographs and videos for projects that are promotional, advertising, commercial, educational, research and/or archival in nature. As such, the camp collects on an ongoing basis individual and group photos.

I, _____, waive ownership of any photographic records taken by the Lion Max Simms Memorial Camp and agree to permit the Lion Max Simms Memorial Camp to use my image, or my child's/dependent's image, (in photograph, digital, or electronic form) for and in camp publications, posters, web-site or other media, without limitation, and agree not to make any claim for misappropriation of personality, breach of privacy, or other loss or damages against the camp in respect thereof. I also understand that the Lion Max Simms Memorial Camp may provide these photographs for use by a third party with whom the Lion Max Simms Memorial Camp may chose to associate with for marketing purposes.

I further agree to inclusion of my name or my child/dependent's name(s): ____yes ____ no

Parent/Guardian Name
(please print)

Parent/Guardian Signature

Date