CAMP O-AT-KA 2027 Camper Application

2027 SESSION DATES **I am making an application for enrollment at Camp O-AT-KA for the period of:**	**REGULAR TUITION**
FULL SEASON June 27 – August 13, 2027	$ 11,700
FIRST SESSION June 27 – July 23, 2027	$ 8,500
SECOND SESSION July 25 – August 13, 2027	$ 7,410
2-WEEK STARTER SESSION A June 27 – July 10, 2027	$ 5,300
2-WEEK STARTER SESSION B July 25 – August 7, 2027	$ 5,300
CIT PROGRAM *Separate application required June 26 – August 13, 2027	$ 8,440

Full name:	Nickname:

Parent/Guardian Name(s):

E-mail Address:

Mailing Address:	STREET	CITY	STATE	ZIP CODE

Phone Numbers:	HOME	CELL	WORK

Birth date (mm/dd/yy):	Grade entering Fall 2027:	Age as of June 27, 2027:

Sibling(s):	Age:	Gender:	School:

T-shirt Size: Youth M _____ Youth L _____ Youth XL _____ Adult S _____ Adult M _____ Adult L _____ Adult XL _____ Adult XXL _____

TUITION:
In order to secure your camper(s) spot, an initial deposit of $1,000 is required and will be applied towards the total tuition cost. If your camper is placed on a wait list, an initial deposit of $1,000 is still required and will be fully refunded if your camper does not get a spot. Tuition is refundable less the deposit until April 15, 2027. Final tuition payments are due on May 1, 2027.
Checks should be made payable to "Camp O-AT-KA" and all major credit cards are accepted.
Tuition rates are ALL INCLUSIVE and the cost will cover your camper's additional expenses including but not limited to day trip fees, travel fees and program/material fees. Costs of shipping trunks, O-AT-KA store purchases and opt-in trip or event fees(ex: road races, whitewater rafting) will be separate transactions in additional to tuition.
A convenience fee of **$35.00** will be applied to all Virtual Terminal (card-not-present) tuition transactions, as these payments are processed through an alternative payment channel rather than our standard in-person payment method. This fee is classified as a **convenience fee**, not a surcharge, and is assessed consistently across all card-not-present transactions. Customers who wish to avoid this fee may submit payment by cash, check, or in person using our standard payment method. We appreciate your understanding and thank you for your continued support.

SIBLING DISCOUNT
A 5% discount will be applied to total tuition costs for two sibling campers.
A 10% discount will be applied to total tuition costs for three or more sibling campers.

FINANCIAL AID
Camp O-AT-KA is a nonprofit organization, and financial aid is available. Please contact the office directly if you are interested in applying for aid. You can e-mail info@campoatka.org or call us at 207-787-3401.

TUITION PAYMENT OPTIONS:

☐ **Option 1. One full tuition payment to be made on _____ (please provide a date before May 1, 2027).** I give O-AT-KA permission to charge my card for the remaining balance of the 2027 tuition on the date provided above.

☐ **Option 2. Four payments – October 31, 2027; December 31, 2027; February 28, 2027; and April 30, 2027** I give O-AT-KA permission to charge my card in four equal payments on the last day of each month.

☐ **Option 3. Monthly payments - October 31, 2027 – April 30, 2027**

I give O-AT-KA permission to charge my card monthly in equal installments on the last day of each month beginning in October and ending in April.

Signature: _____

CERTIFICATION OF PARENT OR GUARDIAN

So that Camp O-AT-KA may provide each child maximum opportunity for personal development, I understand that in signing this application I certify that my child is healthy and free of problems that could be adverse to his happiness or that of other campers. I give Camp O-AT-KA permission to use photos of my son in Camp publications. I agree that in the event this application is accepted and a place reserved for him at Camp O-AT-KA, he will remain in the Camp until the end of the designated period, unless he is dismissed by the Camp authorities for misconduct or for cause considered sufficient by the Camp. In case of voluntary withdrawal or dismissal, I understand that there will be no refund of Camp charges paid for the time reserved. In the event of withdrawal on account of serious illness, a pro rata refund will be made for the unexpired portion of the term. It is my sincere wish that my son enjoy the experience afforded boys at the Camp, and I understand fully that even after reasonable precautions have been taken, many activities such as swimming, hiking, boating, or archery, etc., may involve hazards for which the Camp cannot be held responsible. In the event of apparent serious illness, I wish my child sent to a reliable hospital and skilled medical aid called at once, for which charges I shall be responsible. I authorize the medical designates of the Camp to administer any urgent or emergency treatment considered necessary by the Camp medical staff. I desire that notification of such illness be sent to me by prompt means of communication. I give Camp O-AT-KA permission to take my son on trips for off-site activities with other campers and authorize Camp O-AT-KA staff to sign any release of liability statements for my son required by vendors for such activities. Camp O-AT-KA reserves the right to cancel this application should governmental action or other circumstances make camp operation impossible or unwise. Camp O-AT-KA also reserves the right to decline to accept an application.

Parent/Guardian's Signature:	Printed Name:

Date:

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www.campoatka.org