

2010 COLLEGE TRIP WOMEN'S TRIPS



You may mail application to:
Camp Ogichi Daa Kwe
3515 Michigan Ave.
Cincinnati, Ohio 45208
You may FAX application to:
(513) 772- 5673

PLEASE SIGN ME UP FOR THE SELECTED TRIP (full name): _____

NICKNAME _____ E-MAIL _____ BIRTHDATE: _____

ADDRESS: _____

CITY/STATE/ZIP _____ HOME PHONE (____) _____

EMPLOYER _____ CELL PHONE (____) _____

TITLE _____ BUS. E-MAIL _____ BUS. PHONE (____) _____

Do have any physical limitations/restrictions that would limit or prevent full participation in paddling or portaging? YES NO

If yes, please explain the reason, treatment and/or medication on a separate sheet of paper.

Do you have any dietary restrictions? YES NO If yes, what are they? _____

Do you know how to swim? YES NO

Please note: a Passport is required for border crossings

<i>PRIOR EXPERIENCE</i>	<i>CAMPING</i>	<i>CANOEING</i>
None whatsoever, but I'm eager to learn.	<input type="checkbox"/>	<input type="checkbox"/>
Yes, but I've only done it a few times	<input type="checkbox"/>	<input type="checkbox"/>
Yes, but it's been awhile	<input type="checkbox"/>	<input type="checkbox"/>
No butts about it, I'm an expert and ready to go	<input type="checkbox"/>	<input type="checkbox"/>

BORDER CROSSING

The following information is essential to cross the Border into Canada and to re-enter the U.S. Some crimes in the U.S. may be considered felonies in Canada, limiting ability to cross the border.

Has the applicant been convicted of a crime, DUI or other felony? Yes No
Incident & date of occurrence: _____

- College Trip \$1000:** June 13 - June 22 (7 spaces available)
includes training & 7 day canoe trip
- Summer Women's Trip/Mother-Daughter Trip** (senior high & older) **\$1000:** July 17 - July 26
includes training & 7 day canoe trip
- Family & Friends Trip \$1000:** July 17 - July 26
(your private group - minimum of 6, maximum of 10)
- Fall Women's Trip** (college grads & older) **\$ 1000:** September 7 - 14 (8 spaces available)
includes training & 5 day canoe trip

<i>Payment Schedule:</i>	
January 1, 2010	\$300
March 15, 2010	\$300
May 15, 2010	balance

Payments may be applied to your credit card

MasterCard, Visa, Discover or American Express Payment

Card Number: _____ Exp. Date: _____
 Name (print as it appears on card): _____ 3-digit Security Code: _____ This is the last 3 digits of a number found on the back of the card (MasterCard & Visa) in the signature area. By signing below, I authorize Camp Ogichi Daa Kwe to charge my credit card account in the amount of \$ _____. I agree to pay the amount noted according to the card issuer agreement.
 Signature: _____ Date: _____

Please include \$300 deposit check or credit card information with this application. Early enrollments may be cancelled prior to March 15, 2010 with full refund, except for the \$300 deposit. Between March 15 and May 15, one-half of the amount due will be retained. After May 15, 2010 all monies paid will be retained. No reduction is made for late arrival, or early departure.

APPLICANT'S SIGNATURE

DATE