



FALL CAMP 2020 REGISTRATION FORM

October 8th – October 11th, 2020

Extended Camp October 7th

Dietary Restrictions: ___ Vegetarian ___ Vegan ___ Gluten Free

Name(s): _____ Age(s): _____ Gender: Male Female

Occupation(s): _____

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

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email will be our primary communication method for sending camp information.

E-mail Address: _____

Emergency Contact & Phone: _____ Relationship: _____

Your Veterinarian's Name: _____ Veterinarian Office Phone: _____

Do you ever work/volunteer with dogs? Yes No — If yes: How or with who? _____

First Time Campers: How did you find out about Camp Dogwood? _____

Were You Referred to Camp Dogwood? Yes No If yes: By whom? _____

If you answered "the internet" ...from where? *(please be as specific as possible)* _____

THE CAMP DOGWOOD REFERRAL PROGRAM *We like to show our appreciation to camp alumni and businesses that spread the word about camp with our Referral Program. Get rewarded with a \$25 credit for each new camper you refer to a full weekend program. We track referrals based on camper application responses. Bring a friend or tell the whole town about Camp Dogwood & reap the benefits!*

How many dogs are you planning on bringing to camp? _____

Dog #1 Name: _____ Age: _____ Breed: _____

Dog #1 Male Female Fixed or Intact

Dog #2 Name: _____ Age: _____ Breed: _____

Dog #2 Male Female Fixed or Intact

Where did you get your dog(s), and at what age(s)?: _____

For Double & Group Accommodations, please list your roommate(s) below: _____

For Obedience: Please check ALL that apply to your dog's personality:

I trained my dog by myself I took my dog to obedience classes I worked with a private trainer

CABINS (include electricity and beds. Bathrooms are very close-by)

- Single Occupancy** \$690/person
 - Double Occupancy**..... \$625/person
 - Double Occupancy for 2 members of same household with only 1 dog**..... \$1150/couple
 - Group Occupancy** (this is 3 or more... Call to discuss options and rates) \$550/person
- Check here** to arrive on Wednesday, for **EXTENDED CAMP** add \$165/person

LODGES (include private bathrooms, climate control and hotel-style accommodations.)

- Single Occupancy** \$905/person
 - Double Occupancy**..... \$805/person
 - Double Occupancy for 2 members of same household with only 1 dog**..... \$1470/couple
 - Group Occupancy** (this is 3 or more—Call to discuss options and rates.) call
- Check here** to arrive on Wednesday, for **EXTENDED CAMP** add \$165/person

ADDITIONAL FULL-PROGRAM OPTIONS (Including EXTENDED CAMP**)

- On-Site Tent Camping** (you provide tent and all equipment) \$595 /person
 - Off-Site Lodging** (make your own off-site sleeping arrangements) \$595/person
- Check here** to arrive on Wednesday, for **EXTENDED CAMP** add \$165/person

DAYPASS OPTIONS

- Single Day of Camp: FRIDAY** only\$180 /person
- Single Day of Camp: SATURDAY** only.....\$180 /person
- Two Days of Camp: BOTH DAYS:** 1 person with either 1 or 2 dogs..... \$360 /person
- Single Day of Camp: ONE DAY** (circle: **FRI** or **SAT**): 2 people with 1 dog.....\$300/2 people

Please check ALL that apply to your dog's personality:

- Friendly
- Separation Anxiety
- Submissive
- Runs Away
- Playful
- Territorial
- Dominant
- Nervous
- Energetic
- Fearful
- Needs "space"
- Laid Back
- Well-mannered

My dog is Possessive of:

- Toys
- Food
- Me
- _____

Please indicate your dog's level of socialization, in relation to other dogs: check ALL that apply to your dog:

- | | |
|---|--|
| <input type="checkbox"/> Primarily a backyard dog | <input type="checkbox"/> My dog has been bitten by another dog |
| <input type="checkbox"/> Encounters other dogs on leashed walks | <input type="checkbox"/> My dog has bitten another dog |
| <input type="checkbox"/> A park/beach dog | <input type="checkbox"/> My dog has bitten a person |
| <input type="checkbox"/> Successfully co-mingles at doggie daycare | <input type="checkbox"/> My dog marks territory outdoors |
| <input type="checkbox"/> Participates regularly in organized dog events or activities | <input type="checkbox"/> My dog marks territory indoors |

Are there any topics, activities or suggestions for demonstrations that you have interest in? _____

Are YOU able to add anything we might want to include on our schedule? This can be, but is not limited to dog-related activities. _____

TO SUBMIT THIS APPLICATION FOR THE CAMP DOGWOOD FALL SESSION, PLEASE COMPLETE THIS FORM

• Return with your payment of a \$200 deposit* (per person, per camp) or full payment. Your \$200 deposit holds a guaranteed reservation (based on availability). Any balance must be paid-in-full at least 90 days before this session. • Sign your name in the box below indicating you understand our "Rules & Policies" (can be found online). *Note: **Deposits are NOT REFUNDABLE & NON-TRANSFERABLE.** All rates and fees are subject to our "Cancellation & Payment" terms found within Camp Dogwood's "Rules & Policies". Any issues or questions about payment policies should be addressed prior to registering. Registration forms without a deposit will not be processed or held.

RETURN COMPLETED WITH PAYMENT TO:

Camp Dogwood: Registration, 205 Barberry Road, Highland Park, IL 60035 or FAX both sides to: (312) 268-6170

To make your deposit or payment by Mastercard or Visa, complete the following information. Print legibly:

I would like to charge \$_____ to the card listed below as a: **Full Payment** **Deposit (\$200)** **Other (\$_____)**

Credit Card Number: _____ Expiration Date: _____

Name as it appears on card: _____ Cardholder Signature: _____

Does this card have the same billing address you listed on registration? **Yes** **No** (if no, please provide)

I have read, understand, and will adhere to the Rules & Policies, as well as the Cancellation & Payment terms found in the Dogwood brochure and online at www.Campdogwood.com. - and - I also understand that most rates are provided PER INDIVIDUAL HUMAN and except where noted ("couple rates") the fee applies to each person in your room.

Signature(s) _____ Date _____

