2022 OUTING RESERVATION FORM

Applicant's Address	Phone	City, State, Zip
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If you are the guest(s) of a member, enter member's name _____

For your registration to be considered complete, you must submit **this form** AND:

- FULL Payment (rates below) and
- a signed liability form for each person attending and
- proof of covid vaccinations <u>and</u> booster
- Non-Members must also print, fill-in, sign and submit a Qualifying Activities Form (activities will be completed at the Outing.)

Enter ages of children (17 years and younger). Adults may enter "A" in lieu of age.

Camper's Name	Age	E-Mail	Cur	rent	FWOC Club Name	A	ttending		Fees
			Mem	iber?		Week 1	Week 2	Both	
						7/30-8/6	8/6-8/13		
			Y	Ν					
			Y	N					
			Y	N					
			Y	N					
			Y	Ν					
								Total:	

Cancellations and refund requests must be made in writing to the address below or email to Susan DeLaune <u>sdelaune2@gmail.com</u>. Cancellations will receive a refund minus \$50 nonrefundable portion.

Late Arrival or Early Departure? (Important to know for duty assignments): date and time

Volunteer for extra tasks (names):	_ Would be relief cook (names)		
Favorite Duties:	I prefer: Morning	Evening	□ <u>No Preference</u>

Prefer vegetarian meal options? (names)_____

□ I can offer a ride □ I could use a ride

Make checks payable to: CHEMEKETANS
Mail to: Chemeketan Outing
Susan DeLaune, Treasurer
P.O. Box 864ag
Salem, OR 97308

Cost Per Week			
Adult (15+) Member	\$200		
Adult Non-Member	\$220 (includes Chemeketans membership fee)		
Non-Member age 15-17	\$203 (includes Chemeketans membership fee)		
Age 11 – 14	\$150		
Age 6 - 10	\$ 75		
Age 0 – 5	Free		