

Boundary Breakers Registration

First Name: _____ Last Name: _____

Spouse's Name: _____

Street Address: _____

City: _____ State: _____ Zip code: _____

Email Address: _____

Home Phone: _____

Cell Phone: _____

Meals will be provided in the Dining Hall or you may eat on your own. If you chose to eat all of your meals in the Dining Hall you can take advantage of the discounted meal plan of \$45.00.

Please indicate below which meals you would like to take advantage of.

_____ I will not be taking advantage of the meals provided by Chambers Camp.

_____ I would like the \$45 meal plan.

_____ \$9.50 Friday All you can eat Fish Dinner.

_____ \$6.50 Saturday 8:00am Breakfast Buffet.

_____ \$7.50 Saturday 12:00pm Lunch Buffet.

_____ \$9.50 Saturday 5:00pm Dinner Buffet.

_____ \$6.50 Sunday 8:00am Breakfast Buffet.

_____ \$9.50 Sunday 12:00pm Dinner Buffet

If you require housing, please go to the reservations tab on the website and make your reservation. If you do not have website access you can call 607-542-0992 between 9:00am and 12:00pm to make your reservations.

_____ I have enclosed a check for my meals and programming (\$31.00 per person) to 114 Campground Rd. Beaver Dams, NY 14812.

_____ I will be paying when I arrive.

SPECIAL NOTICE:

I Grant Chambers Camp and Ministry Center the right to take , print and/or electronically use photographs/videos of me and/or my children in connection with camp activities for such lawful purpose as publicity, illustration, advertising and web content.

Signature _____ Date: _____