



CAMP TACONIC

770 New Windsor Road • Hinsdale, MA 01235

Phone: 413-655-2717 Fax: 201-871-2088

Email: info@camptaconic.com

Winter Office:

One Blue Hill Plaza, PO Box 1581 • Pearl River, NY 10965
Phone: 201-871-2086 Fax: 201-871-2088

2025 APPLICATION FOR ENROLLMENT

CAMPER'S NAME _____ DATE OF BIRTH ____/____/____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

HOME PHONE _____ GENDER _____ GRADE AS OF 9/2024 _____

Please check appropriate box indicating session.

☐ Full Season Program

2025 Camp Dates: Wednesday, June 25, 2025 – Tuesday, August 12, 2025

2025 Visiting Day: Saturday, July 19, 2025

Tuition \$15,950

Additional Trip Fees: TBD

Payment Schedule: \$3,000 with Enrollment, \$3,000 by November 1, 2024, \$3,000 by January 15, 2025
Balance by March 15, 2025.

☐ Part Season Program – Available for First Summer Only

Wednesday, June 25, 2025 – Wednesday, July 23, 2025

Tuition \$10,270

Additional Trip Fees: TBD

Payment Schedule: \$3,000 with Enrollment, \$3,000 by November 1, 2024, balance by March 15, 2025

All tuitions are fully refundable until November 1. After March 15, 2025 **no** payments will be refunded unless camp cannot open for any reason in which case there will be a full refund. I understand that part of the camping experience involves activities and group interactions that may be new to my child, and that they come with uncertainties beyond what my child may be used to dealing with at home. Such risks include uneven terrain, standing and moving water, wildlife encounters including mammals, reptiles and insects. I am also aware that my child may participate in off-campus activities such as deep sea fishing, white water rafting, amusement and water parks that involve additional risks. I am aware of these risks and I am assuming them on behalf of my child. I realize that no environment is risk-free, and so I have instructed my child on the importance of abiding by the camp's rules and my child and I both agree that we are familiar with these rules and will obey them. The Camp reserves the right to dismiss, in its sole discretion, any Camper whose condition, conduct, influence or behavior is deemed unsatisfactory or detrimental to the best interest of the Camp or fellow Campers or who violates camp rules and regulations, in which case **no** refund will be made. Permission is hereby given for Camp Taconic to use photographs/ statements/ articles/ names/ music/art/video tape of/by the Camper in promoting Camp-related activities.

Signature of Parent or Guardian

Date

~Please complete both sides of the application~

CAMPER'S NAME: _____

SCHOOL _____ CAMPER'S E-MAIL _____

Parent 1: _____

Occupation: _____

Parent's Email: _____

Business Phone: _____

Cell Phone: _____

Parent 2: _____

Occupation: _____

Parent's Email: _____

Business Phone: _____

Cell Phone: _____

Additional Parent or Summer Address: (if needed)

Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ Zip _____

For Office Use Only:

<i>Date</i>	<i>#</i>	<i>\$</i>