



CAMPER APPLICATION For Groups

- Each group is required to provide the name of the group, two contact names, addresses, phone numbers and email addresses if possible.
- Prime Time requires a \$20.00 deposit from each family planning to attend camp. **Prime Time will refund your deposit upon arrival or if notified of an emergency.**
- During the second week of March each group leader and second contact person will receive a second letter stating the date that your camp has been scheduled. Your confirmation with us must be received by April 30th.
- **Thirty days prior to your camping weekend** we need a head count and the deposit from each family that plans on attending camp. If we do not hear from you we will have to assume your group is no longer interested and may give your weekend to the next group on the waiting list.
- Please indicate your choice of three (3) preferred dates for Camp Sessions, understanding that sessions begin the first weekend in June and run through the first weekend of October excluding holidays. **Please note that the submitting of this form does not guarantee placement in the upcoming season.** As in the past, priority for sessions follows: 1) New groups, 2) Illnesses that impact life expectancy, 3) Groups or families that did not come the previous year. However, even if you would not likely qualify for 2010, receipt of this completed application will put your group on the waiting list in case of cancellations or unfilled cabins.

If your group is interested in attending Camp Prime Time during the 2010 camping season, please complete this form, sign, and **return it by February 23, 2010.** Keep a copy for your files.

Name of Group: _____

Name of Primary Group Leader: _____

Address/City/Zip: _____

Phone: _____ Email: _____

Name of Second Contact: _____

Address/City/Zip: _____

Phone: _____ Email: _____

Description and Size (# you expect to attend) of Group: _____

Preferred Session Dates: 1. _____ 2. _____ 3. _____

Would your group be available for a three day session (Monday – Wednesday) during the week?

Yes _____ No _____

(We will try to accommodate your requests, but unfortunately we cannot guarantee any of your preferred dates.)

SIGNATURE OF GROUP LEADER _____

*Thank you for your cooperation and assistance in helping us provide a special experience at Camp Prime Time to as many families as possible. Please call Diane at (509) 248-2854 if you have any questions. We look forward to seeing you up at Camp Prime Time hopefully in the summer of 2010. Please mail completed Camp Application form to Prime Time, Inc, 6 S. 2nd Street, Suite 802, Yakima, WA 98901 - deadline is **Feb 23, 2010.***