



CAMPER APPLICATION For Groups

- Each group is required to provide the name of the group, **two** contact names, addresses, phone numbers and email addresses.
- Prime Time requires a **\$25.00 deposit from each family** planning to attend prior to attendance at camp. These refundable payments **will be deposited at the time Prime Time receives them. Each camper family has the opportunity to have these funds refunded after their weekend at camp.**
- **30 (Thirty) days prior to your camping weekend** we need the following **from each attending family:**
 - the head count of how many family members will be attending camp, birthdates of anyone age 13 and older and the county in which they reside
 - the **\$25.00** deposit from each family
 - any special dietary needs of any family member
 - A list with a **minimum of three families**, (wait list), in the event a confirmed family cancels.

If we do not hear from you, one month from your camping date we will have to assume your group is no longer interested and may assign your weekend to the next group on the waiting list.

Please indicate your choice of three (3) preferred dates for Camp Sessions. Sessions begin the first weekend in June and run through the first weekend of October. **Please note that the submission of this form does not guarantee placement in the upcoming season.** Priority for sessions is as follows:

1) New groups, 2) Illnesses that impact life expectancy, 3) Groups or families that did not attend the previous year. However, even if you would not likely qualify for a 2017 date, completion of this application will put your group on the waiting list in event of cancellations or unfilled cabins.

If your group is interested in attending Camp Prime Time during the 2017 camping season, please complete this form, sign, and return it by March 10, 2017. Please - keep a copy of this application 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 (number you expect to attend) of Group: _____

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

(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 Cecile "Cec" Anson at (509) 248-2854 if you have questions. We look forward to seeing you at Camp Prime Time in the summer of 2017. Please mail completed Camp Application form to Prime Time, Inc, 6 S. 2nd Street, Suite 815, Yakima, WA 98901 or fax to 509.248.5505 - deadline is March 10, 2017.