

OFFICE USE ONLY: Date: _____ Camp: _____ Week: _____ Name: _____

Triple-R Ranch | 3531 Bunch Walnuts Rd. Chesapeake, VA 23322 | **Registration Form**
Phone (757) 421-4177 | www.triplerranch.org | Fax (757) 421-4179

FAMILY RETREAT REGISTRATION

Last Name of Parent or Guardian _____ First _____ Gender _____
Home Phone () _____ - _____ Cell # () _____ - _____
Address _____ City _____ State _____ Zip _____
Email (for confirmation of your registration) _____

2nd Parent or guardian: Last _____ First _____ Gender _____
Home Phone () _____ - _____ Cell # () _____ - _____

Children Attending:

1. Name _____ Gender _____ Birth Date ___/___/___ Age by Camp Date _____
2. Name _____ Gender _____ Birth Date ___/___/___ Age by Camp Date _____
3. Name _____ Gender _____ Birth Date ___/___/___ Age by Camp Date _____
4. Name _____ Gender _____ Birth Date ___/___/___ Age by Camp Date _____
5. Name _____ Gender _____ Birth Date ___/___/___ Age by Camp Date _____
6. Name _____ Gender _____ Birth Date ___/___/___ Age by Camp Date _____

● Check-in is Friday at 5:00 PM ● Check-out is Saturday at 5:00 PM

PLEASE refer to your confirmation letter as to specific check-in and check-out dates and times for your camp

Financial Policy / Assumption of Risk / Media Release: Please read and sign:

A deposit of \$50 per family is required to make your reservation. The deposit is non-refundable and will be included in the total camp fee. If for whatever reason you must cancel your reservation, written notice must be sent to the office.

I have read and understand the financial policy as it appears on the back of the registration form and I hereby request that my family be accepted to attend Triple-R Ranch. I understand and am aware that we will be participating in many physical activities and that the potential for accidents does exist. In consideration of acceptance to Triple-R Ranch I indemnify and hold harmless Triple-R Ranch, its agents, associates, staff, and board of directors from any and all liability, claims, damage, injury or illness sustained by me or my family members attending with me. I also agree that Triple-R Ranch may photograph and/ or record video of me and my family for use in promotional materials.

Signature _____ Date: _____

How did you find us? Friend Mail Camp Fair Paper or Magazine Radio Internet Search Saw website address posted
 Movie Theater Ad I'm a return camper Billboard Other _____

OFFICE USE ONLY: Check #: _____ Date: _____ Total: _____ Discount: _____ TP: _____

Payment Information:

A deposit of \$50.00 is required to reserve your space. The deposit is non-refundable and is included in the total camp fee. The balance of all camp fees is due 30 days prior to your camp date. There is a \$15 session change fee (Waived until April 15, 2010.) Triple-R Ranch is a non-profit organization. We offer payment by credit card, however payment with check or cash is appreciated.

Check enclosed or Charge to my: Visa Master Card Discover Amount to be charged \$ _____
Card # _____ / _____ / _____ / _____ Expiration Date ___/___/___ 3 digit security code _____