



2019
CHIPPEWA
FAMILY CAMP

Saturday, August 10 – Friday, August 16

Adults (16+) \$700 • Young Adults (8-15) \$550 • Children (4-7) \$450 • Under 4 FREE
The deposit for Family Camp is 25% of your family's tuition.

Last Name _____ Family Email Address _____

Address _____ City _____ State ____ Zip Code _____

Home Phone Number _____ Cell Phone Number _____

Please list names, birthdates and t-shirt sizes for all family members attending.

First Name _____ Birthdate _____ T-Shirt Size ____

First Name _____ Birthdate _____ T-Shirt Size ____

First Name _____ Birthdate _____ T-Shirt Size ____

First Name _____ Birthdate _____ T-Shirt Size ____

First Name _____ Birthdate _____ T-Shirt Size ____

First Name _____ Birthdate _____ T-Shirt Size ____

Cabin Request Notes: _____

We will be paying by check (please send to the address below): _____

We will be paying by credit card (please fill out info below): _____

Name on Card _____ Amount to Charge _____

Card Number _____ Expiration Date _____

Billing Address (if different than above) _____

Please fax, email or mail this form with your deposit to secure your reservation.

cliff@chippewaranchcamp.com - Fax: 866-322-5220 - Phone: 866-209-9322
Winter: 1402 Sheridan Road, Highland Park, IL 60035 - Summer: 8258 County O, Eagle River, WI 54521