

Elks Camp Grassick

Summer Camp Fee Agreement

Camper's Name: _____

Parent/Guardian Name: _____

Please check which camp the child will attend or has attended:

- Three Week Camping Session: \$600.00
- Two Week Camping Session: \$400.00
- Transition One Week Camping Session: \$200.00

Parent/Guardian: If you are paying for all or part of your child's camp fee, please indicate in the spaces below. Camp fees may be made in payments.

Please check the amount you are able to pay or check if you need full or partial sponsorship for your child to attend Elks Camp Grassick.

- I hereby agree to pay \$_____ for my child to attend Elks Camp Grassick.
- I am requesting a partial sponsorship for my child to attend Elks Camp Grassick.
- I am requesting a full sponsorship for my child to attend Elks Camp Grassick.

Parent/Guardian Signature: _____ Date: _____

If you have any questions, please feel free to call camp at 701-327-4251.

Please send this agreement to: Elks Camp Grassick
PO Box F
Dawson, ND 58428