National Computer Camps 2024 Application
Use this Application only for
6 - 8 Year Morning Camp

Camper's Name _____ Gender_____ Birth Date_____
                    Last   **First**

Address _____ City_____ State_____Zip_____

Telephone (   )_____ Email _____

Check location and circle desired week(s) Monday to Friday:

☐   **Fairfield, CT**   **7/14 – 7/19   7/21 – 7/26   7/28 – 8/2**

☐   **Atlanta, GA   6/24 – 6/28**

Cost: **$400 per week minus $50 per week scholarship**

Deposit: **$150 per week**
            Number of weeks _____ x $150 per week = $ _____   Total deposit enclosed

Balance: **Balance is due June 10. Balance payments received after June 10 must include a $40 fee.**
            Applications postmarked after June 10 must include full payment plus an additional $40.00 fee.
            There is a $50 fee for any camp reservation change.
Refund: **All payments are non-refundable.**

<div align="center">

Understanding
</div>

The camp is not responsible for personal belongings lost or damaged by casualty or theft etc. The camp has the right to dismiss individuals due to illness or if their actions or attitudes are detrimental to the best interests of the camp. No refunds will be given upon dismissals, withdrawals or otherwise. I give the camp directors permission to use, at their discretion, photos of my campers taken at camp. I have read the entire application and agree to it.

_____ Relation _____ Date_____
         Signature of parent or legal guardian of camper named above

Camp T-shirts: You may order a NCC camp T-shirt**:**

Please send _____ T-shirts $15.00 each. Total enclosed $ _____

Circle one: Adult   S   M   L   XL

National Computer Camps 2022 Application for Morning Camp
Please send the completed application with payment by check to:
National Computer Camps Inc., 102 Shorefront, Milford, CT 06460 (203) 710-5771
Make checks payable to National Computer Camps, Inc.

Upon receipt of the application NCC will confirm receipt and will send directions to camp and a health form to be signed by a parent and a physician.