



P.O. Box 3191, Tequesta, FL 33469
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2010 Enrollment Form for Camp Wigwam

Customer Information *(Limit of one camper per form please.)*

Camper's Name:		<input type="checkbox"/> Boy <input type="checkbox"/> Girl
Parent / Guardian:		
Street Address:		Apt #:
City:	State:	Zip:
Home Ph: ())	Cell Ph: ())	
E-Mail Address:		

Directions to Your Residence

If you know your address is not found by computer mapping programs, for example MapQuest, please provide directions from the nearest main road or cross street. (For detailed directions, please use the back of this form).

We are located on _____ between _____ and _____

Special Arrangements at Your Home

If nobody is home, **pick up** bags from: Front Porch Back Porch Garage Doorman Other _____

If nobody is home, **return** bags to the: Front Porch Back Porch Garage Doorman Other _____

Service Options

Round Trip (June and August only)

One Way to Camp (June)

One Way From Camp (August)

Inventory

Pieces: 1 2 3 4 5

Please check total number of items

(Sleeping Bags / Tennis Racquets / Hockey Sticks etc not packed inside another bag are considered additional items, and will be charged accordingly).

Service Pricing *(Price includes 2 pieces of baggage)*

	Round Trip	One Way
Massachusetts / Rhode Island	\$165	\$110
Connecticut / New York	\$170	\$115
New Jersey / Pennsylvania	\$175	\$120
Maryland / Washington D.C.	\$180	\$125
Florida	\$205	\$140
Each Additional Duffel Bag	\$75	\$40
Sleeping Bag / Roller Blades / Hockey Stick Tennis Racquet / Lacrosse Stick etc	\$35	\$20

Calculate your total

Service Option Price:	\$ _____
Additional Piece(s):	\$ _____
Sibling Discount \$10 <small>(Applies to every child at the same address)</small>	\$ _____
Late Fee \$25 <small>(Applies after May 15th for service To Camp in June)</small>	\$ _____
Total Due:	\$ _____

Method of Payment

Please return this form with payment prior to May 15th

Check or money order enclosed. Please make checks payable to *Camp Baggage*.

Credit Card (Circle One) Mastercard / Visa Card # _____

Signature: _____ Expiration Date: ___ / ___