



# KAWAGA

*"As God Gave Us the Fire, So Gave He Us the Warmth of Friendship"*

## APPLICATION FOR 2011 ALUMNI FANTASY CAMP WEEKEND

### ALUMNI

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ *Circle T-shirt Size: Adult S M L XL XXL*

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Cell Phone \_\_\_\_\_ E-mail \_\_\_\_\_

YEARS AT CAMP AS CAMPER? \_\_\_\_\_ AS COUNSELOR? \_\_\_\_\_

SACHEM NAME \_\_\_\_\_

ATTENDING GOLF OUTING MORNING OF JUNE 10<sup>th</sup>? Yes \_\_\_\_\_ NO \_\_\_\_\_  
(additional \$60 for Golf Outing)

Cabinmate and/or Cabin Requests

*We will assign you with at least two other Alumni to a cabin, but will consider your special requests for cabinmates.*

### EMERGENCY INFORMATION

Emergency Contact Name \_\_\_\_\_ Relationship \_\_\_\_\_

Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_

**DATES: June 10<sup>th</sup> – June 12<sup>th</sup> 2011 ARRIVAL: June 10<sup>th</sup> between 2 and 5 p.m.**  
***Golfers MUST arrive the evening of June 9<sup>th</sup>***

**FEES: \$275 per Alum – covers all meals, lodging, gear & activities (add \$60 for golf)**  
**\$25 discount if application and payment is sent in by January 31, 2011.**

***APPLICATION WILL NOT BE ACCEPTED WITHOUT PAYMENT AND SIGNED WAIVER***  
***Please make checks payable to Camp Kawaga, Inc. and mail completed application and full payment to:***  
**Camp Kawaga 1415 Larchmont Drive, Buffalo Grove, IL 60089**

If paying by Credit Card you must use  
**VISA, Mastercard or AMEX (Circle One)**

CC # \_\_\_\_\_  
Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_