

BOUNDARY BREAKERS REGISTRATION 2023

First Name: _____ Last Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail Address: _____

Home Phone: _____ Cell Phone: _____

Meals will be provided in the Dining Hall or you may eat on your own. If you chose to eat all your meals in the Dining Hall you can take advantage of the meal plan of \$55.00.

Please indicate below which meals you would like to take advantage of:

_____ I will not be taking advantage of the meals provided by Chambers Camp.

_____ I would like the \$55 meal.

_____ \$11.00 Friday. All you can eat Fish Dinner.

_____ \$8.00 Saturday - 8:00 a.m. Breakfast Buffet.

_____ \$10.00 Saturday 12:00 p.m. Lunch Buffet.

_____ \$11.00 Saturday 5:00 p.m. Dinner Buffet.

_____ \$8.00 Sunday 8 a.m. Breakfast Buffet.

_____ \$11.00 Sunday 12 p.m. Dinner Buffet.

If you require camp housing, please contact the camp office at (607) 542-0992.

_____ I have enclosed a check for my meals and programming (\$55.00 per person) to 114
Campground Road, Beaver Dams, NY 14812.

_____ I will be paying when I arrive.