

Office Use Only

Two Weeks: [] 08CBE1 [] 08CBE2 [] 08CBE3 [] 08CBWAIT Grade: 4M 4F 5M 5F 6M 6F 7M 7F 8M 8F 9M 9F
Explorers: [] 08BES1 [] 08BES2 [] 08BES3 Grade: 4M 5M 6M 4F 5F 6F
Day: [] 08BDC1A [] 08BDC1B [] 08BDC2A [] 08BDC2B [] 08BDC3A [] 08BDC3B Grade: 4M 5M 6M 4F 5F 6F
Amt Due: [] CBE \$1750 [] Rafting (7-9 graders only) \$85.00 [] BES \$1000 [] BDS \$250 x _____ = _____
Deposit Rec'd: \$ _____ Date: _____ { } Check { } Credit Card Balance Due: \$ _____
Payment Rec'd: \$ _____ Date: _____ { } Check { } Credit Card Balance Due: \$ _____
Payment Rec'd: \$ _____ Date: _____ { } Check { } Credit Card Balance Due: \$ _____

Summer Enrichment Programs for Academically Gifted Youth
CAMP BROADSTONE SUMMER 2008 - Appalachian State University

Please check each session you want your camper to attend (see brochure for dates):

Two week Sessions: [] Session 1 [] Session 2 [] Session 3 One week Explorers: [] Explorer 1 [] Explorer 2 [] Explorer 3

Day Camp: [] Session 1A [] Session 1B [] Session 2A [] Session 2B [] Session 3A [] Session 3B

Current grade level: 4th 5th 6th 7th 8th 9th [] Previous camper [] New Camper [] On 2007 Waiting List

Name of Student _____ [] Male [] Female

Mailing Address _____

City _____ State _____ Zip _____

Birth Date: _____ Age _____ Parent's Email (please print clearly) _____

Social Adjustment: Excellent ___ Good ___ Fair ___ Poor ___ (Please attach additional pages for any explanation.)

Home Telephone: Area Code _____ Number _____

Father's name: _____ Day Phone: _____

Mother's name: _____ Day Phone: _____

Name of School: _____ School Phone: _____

To the best of my knowledge I verify that the above information is accurate:

Signature of Parent/Guardian _____ Date: _____

How did you hear about Camp Broadstone: _____

NOTE: Campers who have previously been accepted do not complete this section.

IQ Score _____ Test Name _____ Date Given _____ Examiner's Name _____

Other: Name of Test _____ Date Given _____ Score _____

Latest Achievement Test (Name of Test) _____ Math Percentile _____ Language Arts Percentile _____

To the best of my knowledge I verify that the above information is accurate:

Signature of Teacher/Principal _____ Date: _____

Duke TIP ID # _____ (No signatures required; verified with Duke TIP program)

Applicants are encouraged to return applications promptly. The cost for our 2008 Summer Enrichment Program is \$1750.00 per 2-week session, \$1000.00 per Explorer Session, and \$250 per Day Camp Session. This includes program instruction, room and board (resident campers only), recreation, health services and limited accident/illness insurance coverage. The Rafting fee for 7th, 8th & 9th graders is \$85.00. Space is limited and enrollment is on a first come first served basis, contingent upon receipt of the completed application and \$250.00 deposit for resident camp, \$100 for day camp (\$50 is non-refundable). There will be no refunds issued for any cancellations after February 1, 2008. PAYMENT IS DUE IN FULL BY APRIL 15, 2008.

Credit Card: Please complete the following information if paying by credit card. Faxed applications are permitted for credit card payments only by faxing to 828-262-4992. If you fax this application, please do not mail. VISA/Master Card accepted only.

Credit Card Number _____ Card Holders Name _____
Expiration Date _____ Signature _____ Amount to charge: \$ _____

Checks: Make payable to: Summer Enrichment Program and mail with completed form.

Mail To: Camp Broadstone Summer Enrichment, Conferences & Institutes, ASU Box 32042, Boone, NC 28608.

Registration Questions: Please call Beth Higley at (828) 262-2944, email higleyba@appstate.edu, or go to www.campbroadstone.com

We would be happy to send a Camp Broadstone Summer Enrichment 2008 application to your friends:

Name & address: _____

Name & address: _____