Camp C.O.O.L.

Camp Challenge Ourselves through Outdoor Leisure (C.O.O.L.) is a two-day one-night residential camp for young adults age 10-25 with physical disabilities. Camp C.O.O.L. this year will consist of an exciting two-days of adapted downhill snow ski lessons from the skilled staff of the Achieve Tahoe Program at Alpine Meadows.

Camp staff and campers meet at Belle Cooledge Community Center 5699 S. Land Park Drive, Sacramento, CA 95822

- ✓ 8:00 **am** Saturday morning March 7, 2020.
- ✓ Camp C.O.O.L. will provide all transportation to and from resort, lodge and activities. Lodging will be provided at Granlibakken, Tahoe City CA
- ✓ All activities, food, lodging, transportation and equipment are covered under Camp C.O.O.L. fees.
- ✓ Campers will only need a small amount of spending money at your own discretion.
- ✓ Campers and Staff will arrive back at Belle Cooledge Community Center 5699 S. Land Park Drive, Sacramento, CA 95822 on Sunday March 8, 2020 by 4:30 pm.

ATTACH PHOTO HERE

Camp C.O.O.L.

Camp Dates March 7-8, 2020
$400.00 – Course # 13220

MAILING ADDRESS: CITY OF SACRAMENTO, ACCESS LEISURE
CAMP C.O.O.L. 4623 T STREET SUITE, B
SACRAMENTO, CA, 95819

Name_____ Male ___ Female ___

Age_____ Weight____ (limit 180lbs/to Sit Skiers Only) Height _____ Shoe Size____

Address_____

Home # (____)_____ Cell # _____ Work #_____

Parents/guardian name_____

E-mail Address _____

Emergency Contact and Number_____(_____)_____

Camper's Disability_____

_____

_____

Camper Uses: (Wheelchair) Power Chair ___ Manual Chair ___

Crutches ___ Walker ___ Braces ___ No assistive devices ___

Can you transfer for bus trip? Yes ___ No ___

For more information, please contact Jenny Yarrow at 916-808-6017
E-mail jyarrow@cityofsacramento.org

Camp Fee Information $400.00
Course # 13220

Private Pay – Payment due upon submission of registration packet. Payment may be made by check, money order or Visa or Master Card.

I will be paying by:

- Check _____
- Money Order _____
- Credit Card _____
- Discovery Card _____

FOR OFFICE USE ONLY – PAYMENT INFORMATION

1. **Check or Money order: City of Sacramento Access Leisure**

Payment Received	Check or Money Order Number	Amount Paid

2. **Payment:**

   - **After your acceptance to camp has been received.**
   - **The balance of $400 is due prior to the start date of Camp February 21, 2020.**
   - **Please note that you will be removed from Camp if full payment is not received by February 21, 2020.**

3. **Credit Card: Full Payment only of $400.00**

Credit Card # _____ Expiration Date mm/yy _____

Name as it appears on Credit Card _____ Signature of Card Holder _____