

Williamsburg Farm Camp Summer 2025 Registration

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Camper Informat	ion	
Camper Last Name: _	First Name:	
	Date of Birth// Age at Camp:	
Family e-mail:		
Camper's Address:		
City:	State: Zip:	
Parent/Guardian	Information	
Last Name:	First Name:	
Relationship to Camper:_		
Phone Number:	(indicate cell or land line)	
Alternative Phone Number	er:	
Who besides the parent/g	uardian is authorized to pick this camper up?	
How did you hear about Williamsburg Farm Camp?		
Emergency Conta	ct	
U	annot be reached, please contact the person listed below.)	
Name:	Relationship:	
Phone Number:	Alternative Phone Number:	

Photo Release

__I give permission for photos of my camper to be used in the promotion of the Williamsburg Farm Camp.

___I do not give permission for photos of this camper to be used in the promotion of the Williamsburg Farm Camp.

Williamsburg Farm Camp 2024

Camp Sessions

Which session(s) would you like to attend?

_____June 9 - June 12 _____June 16 - June 20 _____June 23 - June 27

_____July 14 - July 18 _____July 21 - July 25 _____July 28 - August 1

Camp tuition: \$400/camper/week \$375/week sibling or multiple week rate

To reserve your space, a \$175 non-refundable per child deposit is due with this registration form. The remaining balance is due by June 1, 2025. Expect more information as Farm Camp gets close.

Make checks payable to Hideaway Farm.

Mailing address: PO Box #54, Norge, Va. 23127

Cancellation and Refund

We will have camp rain or shine. If a camper needs to withdraw for medical reasons, a physician's documented medical reason will enable the camper to receive a refund for the portion of the session not attended.

I have provided camper, parent/guardian, and emergency contact information; I understand the photo release statement; and I agree to the camp tuition, deposit and related terms.

Authorized Signature

Welcome!

We look forward to sharing our farm with your camper.

Life is always an adventure on the Farm!

WilliamsburgFarmCamp.com – 757-817-7336