



CCMC 2025 Registration

Complete one form for each camper
and mail with the deposit check to:
CCMC, P.O. Box 523, Bellingham, WA 98227-0523

CAMPER INFORMATION

| | | | |
|---|-----------|----------------------|------------------------|
| First Name | Last Name | Primary Phone Number | Alternate Phone Number |
| Email Address | | | Personal Pronouns |
| Mailing Address | | | |
| City | State | ZIP | Country |
| <input type="checkbox"/> I am 18 years or older <input type="checkbox"/> I am applying for a scholarship (enclose \$50 deposit) | | | |

EMERGENCY CONTACT INFORMATION

| | | | |
|---------|---------------|--------------|---------|
| Name | Email Address | Phone Number | |
| Address | | | |
| City | State | ZIP | Country |

WHICH WEEK(S) ARE YOU REGISTERING FOR?

| | | | |
|---|---|--|---|
| <input type="checkbox"/> Week 1: July 12-18 \$250 deposit enclosed) | <input type="checkbox"/> Week 2: July 19-25 \$250 deposit enclosed) | <input type="checkbox"/> Both weeks (if there's space) \$500 deposit enclosed) | If both, which is your preferred week? <input type="checkbox"/> Week 1: July 12-18 <input type="checkbox"/> Week 2: July 19-25 |
|---|---|--|---|

LODGING & PRICING: Number your top 2 choices in order of preference

The base price (\$1500 per person per session) includes all meals and a bed in one of the following:

Your own tent
 3-person cabin
 Your own RV (max 21 feet long, no hookups)
 (spots are limited)

Each cabin has one electrical outlet, a queen bed, and two twin beds. Bath houses with toilets and showers are a short walk for anyone in a tent, cabin, or RV.

For a surcharge (noted below), you may request one of these options:

A cabin with only one other person (\$250 per person surcharge)
 A cabin by yourself (\$500 surcharge)
 A bed in a house (\$500 surcharge. These are NOT private rooms. Houses include living rooms and kitchens used by all campers.

You'll be notified of your housing assignment approximately two weeks before the start of your session. If you owe a surcharge, you'll pay it at that time.



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CABIN PREFERENCES

| | | |
|--|---|---|
| <input type="checkbox"/> Women only | <input type="checkbox"/> Quiet cabin at night | Cabin bunkmate requests (optional): _____ _____ |
| <input type="checkbox"/> Men only | <input type="checkbox"/> Snorers OK | |
| <input type="checkbox"/> Mixed gender | <input type="checkbox"/> Cabin with handicap access | |
| <input type="checkbox"/> No preference | | |

IF MY SELECTED WEEK IS FULL

| | | |
|--|--|---|
| <input type="checkbox"/> Add me to the waiting list for my selected week | <input type="checkbox"/> Add me to the waiting list for the first available opening in either week | <input type="checkbox"/> Cancel my registration and return my deposit |
|--|--|---|

DIETARY RESTRICTIONS

| | | |
|--|--------------------------------------|--|
| <input type="checkbox"/> Omnivore (pretty much eat anything) | <input type="checkbox"/> Gluten free | Do you have any life-threatening food allergies? Please specify: _____ _____ |
| <input type="checkbox"/> No red meat | <input type="checkbox"/> Dairy free | |
| <input type="checkbox"/> Pescatarian (no meat or fowl) | | |
| <input type="checkbox"/> Vegetarian (no meat, fowl, or fish) | | |
| <input type="checkbox"/> Vegan (no animal products) | | Do you carry an EpiPen? Yes No |

REFUND POLICY

Cancellations before June 1, 2025 will receive a refund of \$150. If you cancel between June 1 and two days before your session begins, we'll retain your initial deposit. No refunds for cancellations after that.

COVID PROTOCOLS

CCMC no longer requires proof of vaccination. However, in the interest of keeping everyone as safe as possible, CCMC asks all attendees to take an at-home test within 24 before your departure to camp. If you do not feel well, please don't come to camp, even if you test negative.

DONATIONS

A tax-deductible donation of \$_____ is enclosed. CCMC THANKS YOU FOR YOUR SUPPORT!!!

HOW DID YOU HEAR ABOUT CCMC?

| | | |
|-------------------------------------|--|--|
| <input type="checkbox"/> Friend | <input type="checkbox"/> <i>Acoustic Guitar</i> magazine | <input type="checkbox"/> Music teacher |
| <input type="checkbox"/> Web search | <input type="checkbox"/> <i>folk</i> nik | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Facebook | <input type="checkbox"/> <i>CBA Breakdown</i> | |
| <input type="checkbox"/> Instagram | <input type="checkbox"/> Mandolin Cafe | |

ANY OTHER COMMENTS?

Empty box for additional comments.