

Camp Trinity
Diocese of East Carolina
P.O. Drawer 380
Salter Path, NC 28575
Phone: 888-874-6287
FAX: 1-252-247-3290



CAMP TRINITY

The Episcopal Diocese of East Carolina

2024 REGISTRATION

OFFICE USE ONLY:

Date Received: _____

\$40 Deposit: _____ Ck.# _____

\$20 Registration Fee: _____

Written by: _____

SESSION	DAYS/NIGHTS	DATES	RISING GRADE	TOTAL TUITION
___ Discoverers I *Starter Camp	5/4	June 3 - 7	Mon. - Fri.	2-4 \$630
___ Explorers I	6/5	June 9 - 14	Sun. - Fri.	6-9 \$650
___ Senior High	6/5	June 16 - 21	Sun. - Fri.	10-12 \$650
___ Explorers II	6/5	June 23 - 28	Sun. - Fri.	7-10 \$650
___ *Adventurers	5/4	July 1 - 5	Mon. - Fri.	*** \$665
___ Discoverers II	6/5	July 7 - 12	Sun. - Fri.	3-5 \$650
___ Explorers III	6/5	July 14 - 19	Sun. - Fri.	7-9 \$650
___ Discoverers III	6/5	July 21 - 26	Sun. - Fri.	4-6 \$650
___ Discoverers IV	6/5	July 28 - August 2	Sun. - Fri.	4-6 \$650
___ Please place my child in the first available session, grade appropriate				

Please number sessions in order of preference. If no second choice is indicated, we will place the applicant on the waiting list for that session only.

**Applications for the Adventurers camp, a special outreach opportunity for persons with mental and physical disabilities from this Diocese, are available upon request.*

CAMPER INFORMATION (please print):

Camper's Name: _____
First Middle Last

Preferred Name: _____ Birth Date: _____

Age at Time of Camp: _____ Grade in Fall of 2024 _____ Sex: _____

Parish or Church Membership _____ Diocese _____ Deanery _____

Did you attend Camp Trinity in 2023? Yes No

T-Shirt Size (please circle one) YS YM YL AS AM AL AXL AXXL

PARENT/GUARDIAN INFORMATION:

Name: _____

Address: _____

City _____ State _____ Zip _____

Home Phone: () _____ Day/Work: (Father) _____ (Mother) _____

E-mail: _____ Cell (Father) _____ Cell (Mother) _____

CABINMATE PREFERENCE:

Name _____

Name _____

*Cabinmate requests are not guaranteed but will be considered if:

1. Parent's written requests are received on or before May 1. (Signed requests on this form are sufficient.)
2. Both campers parents agree on the request in writing.
3. No more than two (2) requests per camper.

Camp Trinity is fully accredited by the American Camping Association, meeting 196 written standards for facilities, administration, personnel, and program. Less than one third of the nation's camps hold ACA accreditation. We hold the highest rating from the NC Board of Health for food preparation, general health and safety, water supply, and sanitation.

For All Applicants and Parents:

PARENT SIGNATURE: _____

CAMPER SIGNATURE: _____

A \$60 Deposit IS REQUIRED WITH ALL APPLICATIONS

A \$20 processing fee is **nonrefundable** for all applicants. The deposit is applied to the tuition amount and is **nonrefundable** once an applicant is placed in a session.



Please note: Financial assistance information is located on the back of this application.

E-mail application to: nreynolds@trinityctr.org

P.O. DRAWER 380 • SALTER PATH, NC 28575 • TELEPHONE 888-874-6287 • FAX (252) 247-3290

PARENT/GUARDIAN INFORMATION SHEET

SPECIAL INFORMATION

- All received applications will be dated. Members of parishes in the Diocese of East Carolina and 2023 campers will be given a preferential registration by date received through January 1st.
- A \$60 DEPOSIT (\$40 REGISTRATION and \$20 NON-REFUNDABLE PROCESSING FEE) must accompany each 2024 camper application. The deposit will be applied to the total tuition; once a placement is made in a camp session, it is NON-REFUNDABLE.
- FULL TUITION PAYMENTS ARE DUE FOR ALL CAMP SESSIONS BY MAY 1ST. FEES NOT PAID BY MAY 1 COULD OPEN THE CAMPER SLOT FOR ANOTHER PERSON TO USE IF NEEDED.
- THE HEALTH EXAMINATION FORM IS REQUIRED YEARLY AND IS DUE NO LATER THAN 30 DAYS PRIOR TO THE OPENING OF THE CAMP SESSION. **NO HEALTH FORMS WILL BE ACCEPTED ON OPENING DAY OF CAMP. PRESCREENING FORMS MUST ALSO BE COMPLETED BEFORE ARRIVAL.**
- Camp Trinity's Health Center is staffed by a registered nurse 24 hours a day throughout each session of camp. All of Camp Trinity staff are required to be First Aid and CPR certified. We are located 9.8 miles from Carteret Health Care Hospital.
- **Cancellations must be made in writing. Cancellations postmarked less than 20 days before the session begins will be subject to a penalty of 50% of the camp fee minus the deposit. Cancellations postmarked less than 10 days before the season begins will receive no refund for their tuition.**
- We expect all campers to stay for the entire session. It is important for your child to experience the entire camp week; therefore, we generally do not allow arrivals past opening day or departures before closing day. Any other arrangements must have been made with the Camp Director BEFORE opening day.
- All safety protocols will be in your summer parent letter. Please contact the office with any questions.
- Campers may only attend one session per summer, unless space permits after wait list campers have been served.
- Camp forms are available for download on our website at www.trinityctr.org.

BUSINESS ADDRESS: **CAMP TRINITY (Make checks payable to Camp Trinity)**
P. O. Drawer 380
Salter Path, NC 28575
Phone: 1-888-874-6287 or 1-252-247-5600
Fax: 1-252-247-3290

FINANCIAL ASSISTANCE

• Camp Trinity has a financial assistance policy for those who might otherwise be unable to attend. Camp Trinity may grant financial assistance for one-fourth to one-half of the program cost. We are unable to grant scholarships for the full amount of tuition. When financial aid is requested, it is expected that the parents, guardians, and/or parish take responsibility for part of the tuition and secure a matching amount and/or to then pay the balance. Contact your priest or the camp office for a financial assistance form. We review financial assistance applications in the late spring when the total amount of available funds is known. All requests for financial assistance require the signature of a priest or minister and should be received in the camp office by March 30.

• Financial assistance scholarships are made possible through gifts and memorial contributions to Camp Trinity. Additional scholarship funds are always needed and welcomed and may be mailed to Camp Trinity, P.O. Drawer 380, Salter Path, NC 28575.

MAIL

Receiving mail is very important to every camper. Write often and cheerfully. A box is available at registration for mail you might wish to leave with us. Address mail to: Camper, Camp Trinity, P.O. Drawer 380, Salter Path, NC 28575.

TELEPHONE, VISITS, ETC.

We do not allow visits or phone calls to campers due to the short length of sessions. If you have any questions or concerns during the camp session, please address your calls to the Camp Director at 1-252-247-5600.

DIRECTIONS

Camp Trinity is located in Pine Knoll Shores on Hwy. 58, on Bogue Banks Island, seven miles from the Atlantic Beach bridge or 15 miles from the Emerald Isle Bridge.

Please retain a copy of this information for your records.