Application Form for DEC's Camp Colby Program

Requirements:		n the ages of <u>11 to 13 OR 14-17</u> . terest in nature and outdoor activities	
Location: Fee:	Just south of the village of Saranac Lake on western shore of Lake Colby \$350 – paid for by the Glens Falls-Saratoga Chapter of ADK if selected for sponsorship		
Name:		Birth Date:	
Address:		School:	
		Grade: Gender	
Phone Number:		E-mail address:	
Parent/Guarc	lian:		
Address (if di	fferent)		
E-mail: Work Phone (optional)		Work Phone (optional)	

Please list a sampling of camping/outdoor/environmental experiences you have participated within the last 3 years:

Date	Where	With Whom

On a separate sheet of paper, please tell us why you feel you should be sponsored by the Glens Falls-Saratoga Chapter of ADK to stay at Camp Colby for a week this coming summer. This may include any outdoor skills or educational pursuits as well as past and present interests and/or experiences (recreational or otherwise), expectations, future plans (i.e.-career), environmental concerns and/or anything else considered relevant in helping us make our decision during our selection process. (Print or Type)

Please submit this form with your signature and the signature of a parent or guardian to:

Kim Brown, 18 Lochlea Lane, Lake George, NY 12845

 Applicant Signature

 Parent/Guardian Signature