

**\*\*Registrations must be received by 10/01/2018 to allow camp personnel to place food order. Thanks! \*\***

***The registration form is on the following page!***

**Two Ways to Register:**

**Way 1 (Traditional):**

- Print out this page with attached registration form and fill it in
- Determine the amount that you need to pay
- Write out a check for appropriate amount **payable to Carolambda**
- Send both filled out registration form and check to

**Carolambda 2018  
123 Saint Margaret St.  
Charleston, SC 29403**

**Way 2 (Online):**

**See NOTE below about saving file.**

- Download the registration form PDF, fill out on the computer, save file
- Attach file to email and send to **carolambdaaroundup@yahoo.com**
- Determine appropriate fees on form and remember for checkout
- Hit the Paypal button on registration page and pay the appropriate fees
- Service volunteers will match your registration form email with your PayPal payment (*BOTH must be received for you to be officially registered*)
- ***NOTE: by sending in the registration form by email and providing payment through Paypal you are agreeing to the release in the registration form in lieu of a signature***

***Limited facilities can be reserved for people with special needs and disabilities.  
Please contact [www.Carolambda.com](http://www.Carolambda.com) EARLY  
to reserve the limited available facilities.***

Extend the loving hand of Carolambda: If you would like to offer a scholarship to those who cannot afford the registration fee, please add the scholarship donation to your total.

***If you need scholarship assistance, please contact  
[carolambdaaroundup@yahoo.com](mailto:carolambdaaroundup@yahoo.com)***

**NOTE: To save the filled out .pdf to your computer, you first fill out the form, go to print but instead of printing, change the selected printer to "Adobe PostScript File", this will change the print button to say "SAVE". When you press save it will give you the option where to save it.**

**Carolambda 2018 Registration**  
*October 5, 6 & 7 (Fri. – Sun.) - Columbus Day Weekend*

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Name (s) \_\_\_\_\_

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Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

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Telephone \_\_\_\_\_ E-Mail \_\_\_\_\_

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Sobriety/Recovery Date (s) \_\_\_\_\_

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**In Case of emergency notify: \_\_\_\_\_ Phone Number: \_\_\_\_\_**

If you have any allergies, reactions to medications, and/or other medical limitations, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

If you are currently taking any medication – prescribed or otherwise, please list:  
\_\_\_\_\_  
\_\_\_\_\_

AA       ALANON       Other(s) \_\_\_\_\_

Registration Deposit \_\_\_\_\_ X \$25.00 = \_\_\_\_\_  
*(This is just deposit, and all must pay even if requesting a scholarship.)*

Early Registration Balance (Before 10/1/17) \_\_\_\_\_ X \$100.00 = \_\_\_\_\_

Regular Registration Balance (After 10/1/17) \_\_\_\_\_ X \$110.00 = \_\_\_\_\_

Please Donate to the Scholarship Fun \_\_\_\_\_ *(Please help if you can!)*

**(Total includes deposit, registration balance and donations) TOTAL = \_\_\_\_\_**  
**Example: 1 person, early registration, no donation: \$25 + \$100 = \$125.00 (after 10/1/18 = \$135)**

***\*\*Registration includes all scheduled events, meals, & lodging for the weekend\*\****

**Release of Liability**

*I have read and agree with the Carolambda 2018 Recovery Weekend rules. I understand that participation in certain activities (including, but not limited to, rope courses, wildlife study, swimming, boating, archery, hiking, etc.) at Gravatt may be physically and emotionally demanding. I affirm to the best of my ability that my health is good, and that I am not under a physician's care for any undisclosed condition that might endanger my health or that of other participants. I recognize the inherent risk of physical injury that could result from any of these activities. I release, discharge, and hold harmless Gravatt, it's employees, agents from any and all liability from any injury to me from participation in activities at Gravatt Camp & Conference Center. I give Gravatt staff permission, in case of accident or injury, to administer first aid and/or arrange transportation to a medical facility.*

*I have read and fully understand this release and hereto sign my name this \_\_\_\_\_ day of \_\_\_\_\_, 2018*

**Participant's Signature(s) - if filling out PDF, by typing in your name(s), you agree to the release above. Your payment will further support your agreement to the release above.**

**Round-up Rules:**

- Be responsible for your own first aid
- Provide your own medical and liability insurance
- The use of illegal drugs and alcohol are prohibited
- Protect the wildlife and natural environment of the property ~ **NO FIREWORKS**
- **Do not** bring pets to Gravatt
- **No** personal tents or campers permitted
- **Separate** female and male gender identified housing