

Use Only For
**ALUMNI
 CAMPER
 RESERVATION**

To be completed by Parent or Guardian – Copy as needed

LEGIONVILLE SCHOOL SAFETY PATROL TRAINING CENTER
**REQUEST FOR ALUMNI CAMPER RESERVATION and
 ENROLLMENT**

SEND COMPLETED FORM AND CHECK TO:

Legionville
 The American Legion
 20 W. 12th St., Room 300A
 St. Paul, Minnesota 55155

Legion Post No. _____
Auxiliary Unit No. _____
SAL Squad No. _____
Legion District No. _____
Bus Group (if applicable) _____

I request a reservation for _____ from _____ in _____
 (Name of Camper) (School) (Town)

as an ALUMNI CAMPER for this summer. I understand that in order to be eligible to be an ALUMNI CAMPER, they must have attended Legionville within the last 3 years. My ___ son/ ___ daughter attended/ would have attended Legionville the summer of _____. (2016, 2017, 2018)

PLEASE MAKE CHECKS PAYABLE TO LEGIONVILLE.

Enclosed is our remittance of \$ _____ in registration fee(s) at **\$285.00** for each student.

We prefer our ___ son/ ___ daughter attend the _____ session. Our alternate choice is the _____ session.
 Please note - Session 7 is not available for ALUMNI CAMPERS.

**Session 3 is reserved exclusively for ALUMNI CAMPERS
 with activities specifically for them.**

If your son/daughter would like to attend one of the other sessions as an ALUMNI CAMPER, they would participate in the same activities and classes as the last time they attended Legionville.

The Alumni registration fee of \$285.00 would still apply.

** PLEASE NOTE - A minimum of 13 campers is required to hold Session 3 which is reserved for only alumni campers. **
 If 13 alumni campers are not signed up by June 1st, the session will be canceled and registration fees will be refunded in full.

We understand that reservations for preferred sessions will be on a First Come – First Served basis.

Please send registration material and information to:

Parent/ Guardian Name _____	Phone Number _____ - _____
Address _____	Alternate phone number _____ - _____
_____	Summer phone no. _____ - _____
_____	E-Mail _____
City – State – Zip _____	

CANCELLATION POLICY - We agree that if we fail to advise of the cancellation of a reservation at least two weeks in advance of the opening date of sessions confirmed, we will forfeit the amount of \$285.00 per enrollment cancelled, unless a substitute is in attendance at this session.

We understand that The American Legion reserves the right to cancel reservations for failure to submit completed registration forms at least two weeks before the opening of the reserved session, or for failure to comply with regulations set forth in the folder.

For the alumni camper _____ Signed _____
 (Name of Camper) (Parent/Guardian)

Dated: _____ Address _____

This form does NOT constitute the registration. The official registration cards and other material will be mailed after receipt of this certificate. Registration of each student must then be completed and sent to the above address not later than two weeks prior to the assigned session.