

## **2024 Annual Registration for Organized Camps**

This form is used to register your organized camp(s) with the Pa. Department of Health for the 2024 season (July 1, 2024 – June 30, 2025). The form provides room to list up to five camps by one owner, but you may attach additional pages, if necessary. Only one \$10 registration fee is required <u>per camp owner</u>. Send your completed registration form and a \$10 check or money order (made payable to Commonwealth of Pennsylvania) to PA Department of Health; Bureau of Community Health Systems; 30 Kline Plaza, Harrisburg, PA 17104. **Registration for the 2024 season is due by June 30, 2024.** If you have any questions, please call 717-787-4366 or email <u>ra-dhorganizedcamps@pa.gov</u>.

OWNER/OPERATOR NAME	
Business Name (if applicable)	
Owner mailing address – street/PO box	
Owner mailing address – city, state, zip	
Owner county	
Owner phone no	
Owner email address	
Preferred contact method: Phone $\square$ Email $\square$	
Has the owner information changed from last year? Yes $\square$ No $\square$	
First CAMP NAME	
Physical location – streetPhysical location – city, state, zip	
	Physical location – county
Camp phone no	
Camp email address (if applicable)	
Camp website (if applicable)	
Was this camp location registered last year? Yes $\square$ No $\square$	
Camp status this season: open this season $\square$ , closed this season $\square$ , or permanently closed $\square$	
Does this camp have a kitchen that prepares and serves food to campers? Yes $\square$ No $\square$	
Does this camp provide overnight lodging for campers? Yes $\square$ No $\square$	
Does this camp have swimming as part of its program? Yes $\square$ No $\square$	
Is swimming provided on site? Yes $\square$ No $\square$	
Does the camp have any of the following on site as part of the program? Select all that apply.	
Pool □ Spa □ Beach □ Other □ None □	
If off site swimming is used, provide the facility name and location.	
Does this camp have a ropes course as part of its program? Yes $\square$ No $\square$	
Is the ropes course on site? Yes $\square$ No $\square$	
Does this camp have a zipline as part of its program? Yes $\square$ No $\square$	
Is the zipline on site? Yes $\square$ No $\square$	



Second CAMP NAME (same owner)
Physical location – street
Physical location – city, state, zip
Physical location – county
Camp phone no
Camp email address (if applicable)
Camp website (if applicable)
Was this camp location registered last year? Yes $\square$ No $\square$
Camp status this season: open this season $\square$ , closed this season $\square$ , or permanently closed $\square$
Does this camp have a kitchen that prepares and serves food to campers? Yes $\square$ No $\square$
Does this camp provide overnight lodging for campers? Yes $\square$ No $\square$
Does this camp have swimming as part of its program? Yes $\square$ No $\square$ Is swimming provided on site? Yes $\square$ No $\square$
Does the camp have any of the following on site as part of the program? Select all that apply.
Pool □ Spa □ Beach □ Other □ None □
If off site swimming is used, provide the facility name and location
Does this camp have a ropes course as part of its program? Yes $\square$ No $\square$
Is the ropes course on site? Yes $\square$ No $\square$
Does this camp have a zipline as part of its program? Yes $\square$ No $\square$
Is the zipline on site? Yes $\square$ No $\square$
Third CAMP NAME (same owner)
Physical location – street Physical location – city, state, zip
Physical location – county
Camp phone no
Camp email address (if applicable)
Camp website (if applicable)
Was this camp location registered last year? Yes $\square$ No $\square$
Camp status this season: open this season $\square$ , closed this season $\square$ , or permanently closed $\square$
Does this camp have a kitchen that prepares and serves food to campers? Yes $\square$ No $\square$
Does this camp provide overnight lodging for campers? Yes $\square$ No $\square$
Does this camp have swimming as part of its program? Yes $\square$ No $\square$
Is swimming provided on site? Yes $\square$ No $\square$
Does the camp have any of the following on site as part of the program? Select all that apply.
Pool □ Spa □ Beach □ Other □ None □



If off site swimming is used, provide the facility name and location
Does this camp have a ropes course as part of its program? Yes $\square$ No $\square$
Is the ropes course on site? Yes $\square$ No $\square$
Does this camp have a zipline as part of its program? Yes $\square$ No $\square$
Is the zipline on site? Yes $\square$ No $\square$
Forth CAMP NAME (same owner)
Physical location – street Physical location – city, state, zip
Physical location – county
Camp phone no
Camp email address (if applicable)
Camp website (if applicable)
Was this camp location registered last year? Yes $\square$ No $\square$
Camp status this season: open this season $\square$ , closed this season $\square$ , or permanently closed $\square$
Does this camp have a kitchen that prepares and serves food to campers? Yes $\square$ No $\square$
Does this camp provide overnight lodging for campers? Yes $\square$ No $\square$
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Does this camp have swimming as part of its program? Yes $\square$ No $\square$
Is swimming provided on site? Yes $\square$ No $\square$
Does the camp have any of the following on site as part of the program? Select all that apply.
Pool □ Spa □ Beach □ Other □ None □
If off site swimming is used, provide the facility name and location.
Does this camp have a ropes course as part of its program? Yes □ No □
Is the ropes course on site? Yes $\square$ No $\square$
Does this camp have a zipline as part of its program? Yes □ No □
Is the zipline on site? Yes $\square$ No $\square$
Fifth CAMP NAME (same owner)
Physical location – street Physical location – city, state, zip
Physical location – county
Camp phone no
Camp email address (if applicable)
Camp website (if applicable)
Was this camp location registered last year? Yes \( \subseteq \) No \( \subseteq \)
Camp status this season: open this season $\square$ , closed this season $\square$ , or permanently closed $\square$



es this camp have a kitchen that prepares and serves food to campers? Yes $\Box$ No $\Box$
Does this camp provide overnight lodging for campers? Yes $\square$ No $\square$
Does this camp have swimming as part of its program? Yes $\square$ No $\square$
Is swimming provided on site? Yes $\square$ No $\square$
Does the camp have any of the following on site as part of the program? Select all that apply.
Pool □ Spa □ Beach □ Other □ None □
If off site swimming is used, provide the facility name and location.
Does this camp have a ropes course as part of its program? Yes $\square$ No $\square$
Is the ropes course on site? Yes $\square$ No $\square$
Does this camp have a zipline as part of its program? Yes $\square$ No $\square$
Is the zipline on site? Yes $\square$ No $\square$