



Delaware Division of Parks and Recreation
Cape Henlopen State Park
Biden Environmental Center
15099 Cape Henlopen Drive
Lewes, DE 19958
Phone 302-644-5005
Fax 302-644-5012

Resident Youth Camp Application

Group Name _____ Day/Evening Phone # _____

Group Address _____ City _____ State _____ Zip Code _____

Contact Person's Name _____ Day/Evening Phone# _____

Address _____ City _____ State _____ Zip Code _____

Contact email address: _____

Reservation dates request:

1st Choice: Arrival Date: _____ (2:00 p.m.) Depart Date: _____ (11:00 a.m.)

2nd Choice: Arrival Date: _____ (2:00 p.m.) Depart Date: _____ (11:00 a.m.)

3rd Choice: Arrival Date: _____ (2:00 p.m.) Depart Date: _____ (11:00 a.m.)

Number of Youths _____ Number of Chaperones (Must be over 21) _____ Number of Dorms _____

Circle the Camp(s) You Wish to Reserve:

Youth Camp I

15 People per Dorm
 8 Dorms Available (120 people)
 In State: \$140 per dorm/per night
 Out of State: \$180 per dorm/per night

Yes I want this Camp

Youth Camp II

15 People per Dorm
 8 Dorms Available (120 people)
 In State: \$140 per dorm/ per night
 Out of State: \$180 per dorm/per night

Yes I want this Camp

**Youth Camp III
 (The Officer's Club)**

25 People per Dorm
 2 Dorms Available (50 people)
 Air Conditioned/ Heated
 In State: \$250 per dorm/night
 Out of State: \$310 per dorm/night

Yes I want this Camp

Cancellation Policy: A group may **cancel** its reservation by notifying the Park Office in writing sixty (60) days *prior* to their scheduled arrival date. A **non-refundable** administrative fee of **20%** will be deducted from the group's original deposit. The total deposit will be **forfeited** if notice of cancellation is given with less than sixty (60) days notice. To decrease the number of reserved dorms, the group must notify the Park Office **in writing** sixty (60) days prior to their scheduled arrival date or the group will be expected to pay the full amount for all dorms originally reserved.

I certify that I have read and understand the enclosed rules and regulations:

Date: _____ Signature: _____

Do not write below this line – Staff Use

Reservation date _____ Camp _____
 Number of dorms _____ X rate _____ = _____ X Number of Nights _____ = _____
 Deposit _____ due by _____ Receipt # _____
 Balance of _____ due _____ Receipt # _____