

NEW HAMPSHIRE CAMP DIRECTORS' ASSOCIATION
2007 Directory of Summer Camps Listing

Enclosed please find our NHCDA "Directory of Summer Camps" worksheet.
Please complete the information and return it
along with your dues payment check according to the following invoice.

NEW HAMPSHIRE CAMP DIRECTORS' ASSOCIATION 2007 MEMBERSHIP INVOICE

Camps licensed by the NH Department of Environmental Services are eligible for membership. Dues are determined by the previous year's gross income as shown below.

Business members can join the NHCDA for membership dues of \$50.00 per year. Associate Members are those individuals (other than the camps director of record) who wish to receive mailings and information from the NHCDA in addition to the mailings sent directly to the camp. Associate Members can be board members, retired directors or others wishing to support the work of NHCDA.

GROSS INCOME	DUES
Under \$40,000.00	\$ 55.00
\$40,000.00 - \$70,000.00	\$ 85.00
\$70,000.00 - \$150,000.00	\$120.00
\$150,000.00 - \$250,000.00	\$155.00
Over \$250,000.00	\$195.00
Associate Members (Individuals other than Camp directors)	\$ 25.00
Business Members	\$ 50.00

Category of Membership: Camp Associate Business

Dues Amount Enclosed \$ _____

Name: _____

Business/Camp Affiliation: _____

Mailing Address: _____

City/Town: _____ State: _____ Zip Code: _____

Telephone: _____ Fax: _____

e-mail: _____

NEW HAMPSHIRE CAMP DIRECTORS' ASSOCIATION
DIRECTORY OF SUMMER CAMPS LISTING WORKSHEET

Please print your information below. (This is how your camp will be listed in the Directory.)

Name of Camp: _____ Length of camping sessions: _____

Ages: _____ # children/adults per session _____

Web site address: _____ e-mail: _____

Summer mailing address: _____
street city/town State zip

Summer telephone #: _____ Fax #: _____

Winter mailing address: _____
street city/town State zip

Winter telephone #: _____ Fax #: _____

Camp type – check appropriate boxes: Resident camp Day Camp Travel Boys
 Girls Coed Adults Private Church Non-Profit Facility Can Be Leased
 Agency School Town Other classification not listed _____

Name of Director: _____ Season opening/closing dates: _____

Cost per session: _____

Concise description of your camp as it will be printed in the Directory: _____

Mail in this completed form, along with your dues check to:
NHCDA
PO Box 324
Barnstead, NH 03218