

APPLICATION

Counselor group age divisions are based on the camper's birth date. As room configurations are varied, roommate requests will be accommodated when conditions permit.

I would like to room with:

(Please make sure the person listed is attending the same session as you.)

Circle camper's t-shirt size (Adult sizes):
XS S M L XL XXL

I have attended St. Vartan Camp before for _____ year(s).

I am applying for a campership from _____ parish.

Checks payable to: **ST. VARTAN CAMP**

Please note: We appreciate prompt notification if a camper must cancel. **A \$100 fee will be assessed for cancellations after June 1.**

**Mail application(s)
and 50% deposit to:**

Diocese of the Armenian Church (Eastern)
St. Vartan Camp
630 Second Avenue
New York, NY 10016

FINANCIAL ASSISTANCE

If you are in need of financial assistance, please check with your pastor for a possible parish campership. A **family discount** is available for those attending two-week sessions only: a \$50 tuition reduction for each additional child registered from the same family.

REGISTRATION

Online registration and credit card payment is available at www.stvartancamp.org. You may also register by completing and sending in the attached application (please be sure to fill in all information requested) along with a 50% deposit, payable to St. Vartan Camp.

After we receive your deposit (either online or via mail), you will be sent an **acceptance packet**, which includes medical and other registration forms, as well as additional details.

The balance of your payment and your completed medical forms are due postmarked by May 15, 2008, in order to reserve a place for your child. Be advised that doctor appointments might need to be made in advance to meet the deadline.

For **photos of the facilities and driving directions** to the Ararat Center, please visit www.araratcenter.org.

For those wishing to attend both St. Vartan Camp and the St. Nersess Summer Conferences, please avoid any scheduling conflicts by visiting www.stnersess.edu for conference dates. Remember, campers must arrive and participate in the St. Vartan Camp orientation on the day their session begins.

For more information contact Jennifer Morris, Coordinator of Youth Outreach, by calling (212) 686-0710 ext. 118 or e-mailing jenniferm@armeniandioocese.org.

Camp Director:
Rev. Fr. Krikor A. Sabounjian

Youth Outreach Coordinator:
Jennifer E. Morris

Programming Director:
Julie Hoplamazian

Camp Office Coordinator:
Lydia Kurkjian

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SAINT
VARTAN
CAMP 2008

June 22 – July 5

July 6 – July 19

July 20 – August 2

ARARAT CENTER, Greenville, NY

Faith
Friends
Fun



Diocese of the Armenian Church of America
Archbishop Khajag Barsamian, Primate

Apply online starting February 15 at
www.stvartancamp.org

AS DEMAND FOR ST. VARTAN CAMP CONTINUES TO GROW, we are pleased to offer three two-week sessions to accommodate the growing number of campers. St. Vartan Camp, sponsored by the Diocese of the Armenian Church of America (Eastern), is led by an experienced staff and administration who provide a physically, emotionally, and spiritually healthy environment in which young Armenian-American Christians can grow and flourish as they develop a deeper understanding of their faith and culture.

HOUSED AT THE BEAUTIFUL 65-ACRE ARARAT CENTER and overlooking the scenic Catskills, St. Vartan Camp takes advantage of an on-site pool, tennis court, basketball court, soccer field, and contemporary dining and recreational facilities.

WITH THE GOAL OF OFFERING YOUTH A FULFILLING EXPERIENCE, the program offers a blend of Armenian religion, language, culture, history, dance, music, arts, fellowship, along with a full sports program including soccer, basketball, softball, volleyball, tennis, and swimming. Special activities include dances, talent shows, camp Olympics, nature hikes, and campfires. **St. Vartan Camp invites all children to experience a place where Armenian faith and culture are nurtured and nourished, a place every child can call "home."**

THE CAMPERS ARE UNDER THE SUPERVISION AND CARE OF QUALIFIED COUNSELORS specially chosen for their concern and devotion to our Armenian youth. Our staff strives to help our campers reach their individual potential through success-oriented experiences. Our full-time nursing staff provides healthcare with a priority on safety. The cafeteria provides three nourishing meals each day, including authentic Armenian cuisine. Accommodations offer community living, with lounges, recreational areas, and all the comforts of home.

PROGRAM AGES

The St. Vartan program is for campers ages 8 to 15. Camper age groups and room assignments are determined by the camper's birthdate and age on the first day of the session.

PROGRAM DATES AND TUITION

Session A

Two-week session: June 22-July 5 \$930
 One-week sessions*: June 22-June 28/June 29-July 5 . . \$530

Session B

Two-week session: July 6-19. \$980
 One-week sessions*: July 6-12/ July 13-19. \$580

Session C

Two-week session: July 20-Aug. 2. \$880
 One-week sessions*: July 20-July 26/July 27-Aug. 2 . . \$480

** Spaces for one-week sessions are very limited, with priority given to two-week campers.*

Save \$30 off each camper's tuition by registering before March 15!

FOR TEENAGERS 16 AND 17 Counselor-in-Training (CIT) Program

Session A: June 21-July 5

Session B: July 5-19

Session C: July 19-August 2

CIT Program Tuition: \$500

The CIT program, open to qualified 16 and 17 year olds, offers leadership training that includes both "on-the-job" training and daily leadership and team building classes. **CITs must apply and be accepted into this competitive program.** To request an application, *due March 15*, e-mail jenniferm@armeniandiocese.org or call 212-686-0710 ext. 118.

Note: CITs must arrive a day before campers for a special orientation. There are limited CIT spots for each session, so call today to request an application. Applications are due March 15, 2008.

APPLICATION

(Print and use a separate application for each camper)

Name: _____

Address: _____

City: _____

State: _____ Zip: _____

Parent email address: _____

Camper email address: _____

Birth date (mm/dd/yy): ____ / ____ / ____

School grade next fall: _____

Male Female

Mother's name: _____

Father's name: _____

Home phone: _____

Work phone: _____

Cell phone: _____

Parish affiliation: _____

CHECK DESIRED SESSION(S):

- Session A:** June 22-July 5
- Session A1:** June 22-June 28
- Session A2:** June 29-July 5
- Session B:** July 6-19
- Session B1:** July 6-12
- Session B2:** July 13-19
- Session C:** July 20-Aug. 2
- Session C1:** July 20-July 26
- Session C2:** July 27-Aug. 2

Since sessions fill up quickly, is your child willing to attend another session if your first choice is unavailable? Yes No