



2017 SUMMER MOCK TRIAL CAMP

CAMP INFORMATION

CHAPEL HILL: July 26- 29.

Day camp and overnight options.

Deadline to register/all fees due: Friday July 7

CAMP OFFERS BASIC AND ADVANCED TRACKS!

REGISTRATION PROCESS

- Register and pay online (<http://www.ncmocktrial.org/camps/ccce-summer-camps>), or submit the completed registration form with a \$50 non-refundable deposit to State Coordinator Sue Johnson, PO Box 9626, Chapel Hill, NC 27515.
- **NOTE:** Applications received by **Friday, May 26** will receive an “*Early Bird discount.*” *Five or more applications submitted together (at any time) will also receive a discount.*
- **All overnight student campers MUST be accompanied by an adult (1 per 8 students) who must supervise the students from 5:30 pm – 8:00 am each night of camp.**
- **Adult campers** receive room, breakfast/lunch, training, manuals, DVDs, and all other materials. **Adults** who come *only as chaperones* receive room and breakfast only.
- Questions? Contact Sue Johnson (SueHeathJohnson@gmail.com or 919-360-0848)

CCCE SUMMER
MOCK TRIAL CAMP

2017

DAY CAMPER REGISTRATION FORM

(Each participant, student or adult, must submit a form)

Participant Name: _____ Phone: _____

Mailing Address: _____

DOB (minors only): _____ Email: _____

Student? Yes _____ No _____ Grade level (fall 2017) _____ Gender (circle) M F

Adult? Yes ___ No ___ *Please circle:* Teacher Attorney advisor Parent Other _____

School/team (name/city): _____

Previous mock trial experience? Yes _____ No _____ How many years? _____

Do you want to attend the Basic or Advanced sessions? Basic _____ Advanced _____

FEES:

Day Camper (student/adult): \$225

* **Early Bird:** \$195 (*Application/Deposit received by May 26*)

* **Group rate:** \$195 (*5+ students and/or adults; submitted together*)

DEPOSIT SUBMITTED WITH APPLICATION: \$50 (*non-refundable*)

Deposit is applied toward total fees due. Remaining fee = total fees – deposit.

Checks should be written payable to “CCCE”

REMAINING FEES: \$ _____ (*Must be RECEIVED by Friday, July 7*)

Please send registration form and deposit to:

CCCE State Coordinator Sue Johnson

PO Box 9626

Chapel Hill, NC 27515-9626

OVERNIGHT CAMPER REGISTRATION FORM

(Each participant, student or adult, must submit a form)

Participant Name: _____ Phone: _____

Mailing Address: _____

DOB (minors only): _____ Email: _____ Gender: M F

School/team : _____ Roommate request: _____

Student: Grade (fall 2017) _____ **Name of adult chaperon*:** _____

Adult: __ Participant (*Circle:* coach teacher attorney) __ Chaperon (*Circle:* parent teacher)

Previous mock trial experience? Yes _____ No _____ How many years? _____

Do you want to attend the Basic or Advanced sessions? Basic _____ Advanced _____

*** Adult chaperon is responsible for students from 5:30 pm – 8:00 am each day**

FEES: [*Overnight groups of 5+ pay “Early Bird” price even after May 26*]

Overnight Participant (student/adult): \$395

* **Early Bird:** \$350 (*Application/Deposit received by May 26*)

* **Group rate:** \$350 (*5+ students and/or adults; submitted together*)

Adult chaperone only:** \$295 (*Room, breakfast; no lunch, training, or materials*)

**** No Early Bird or Group discount available**

DEPOSIT SUBMITTED WITH APPLICATION: \$50 (*non-refundable*)

REMAINING FEES: \$_____ (*Must be RECEIVED by Friday, July 7*)

Deposit is applied toward total fees due. Remaining fee = total fees – deposit.

Please send registration form and deposit (payable to “CCCE”) to:

CCCE State Coordinator Sue Johnson

PO Box 9626

Chapel Hill, NC 27515-9626