

2018 Camp Membership



Organization/Camp Name _____

Address _____

City/ST/Zip _____

Phone _____ Website _____

Federal Tax ID/Country NGO Number _____

ACA Camp Number (Accredited Camp) _____

Name & Credentials _____

Role/Job with Camp _____

Email Address _____

Mobile/Work Phone _____

Membership Fee (Calendar Year) - \$250 US

Return with payment to: Diabetes Education and Camping Association
16681 McGregor Blvd
Suite 205
Fort Myers, FL 33908