

CCCA New Member Application

Apply online with the easy-to-use form at www.ccca.org/members/application_camp.asp.

Just for the record...

(Please print in uppercase and lowercase letters. Thank you.)

Step 1

Camp/Conference Contact Information

This information will appear in the CCCA online Membership Directory.

Camp/conference name: _____

Physical address of camp/conference: _____

City: _____

State: _____ Zip: _____ Country: _____

Camp/conference phone: (_____) _____

Toll-free number (if applicable): (_____) _____

Camp/conference fax: (_____) _____

Camp/conference e-mail: _____

Web site: _____

General location:

Camp/conference is located (number) _____ miles
(circle one) N NE E SE S SW W NW of (state capital
or closest city with a commercial airport) _____

Mailing address (if different from physical address): _____

City: _____

State: _____ Zip: _____ Country: _____

Business phone

(if different from camp/conference):

(_____) _____

Business fax

(if different from camp/conference):

(_____) _____

Which membership option is right for you?

Step 2

Alliance Information

In CCCA, there are two options for membership. Membership fees are the same in either case. Check the appropriate box below after reading this entire section.

- Camp/Conference Membership**
This option qualifies you for all member benefits, plus gives you the privilege of voting for section officers, region officers and national board members. When you select this option, you acknowledge your camp/conference's affirmation of the CCCA Statement of Faith:

We believe in the Holy Scriptures as originally given by God, divinely inspired, infallible, entirely trustworthy, and the supreme authority in all matters of faith and conduct; the triune God—Father, Son, and Holy Spirit; the deity of the Lord Jesus Christ, His substitutionary atonement for sin, His bodily resurrection, and His personal, visible return to earth to reign in righteousness and glory; the Person of the Holy Spirit and His work of conviction, regeneration, and sanctification, Who indwells every believer, equipping them with gifts of service and witness; the necessity of new birth, in salvation by faith in Jesus Christ alone, and the importance of a life fully committed to the will of God in Christ; and the church as the one universal body of Christ Who is the head, called to be God's redeemed people.

- Camp/Conference Associate Membership**
This option qualifies you for all member benefits except the privilege of voting. This option exists for camps and conferences that, for any number of reasons, choose not to affirm the CCCA Statement of Faith.

Along with this application, the associate member applicant must provide CCCA with a statement of purpose/mission and a statement of faith published in an official document (e.g., articles of incorporation, bylaws or brochure). CCCA may also request other items for review.



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What is included?



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Step 3

Membership Fee Information

Your membership fee is based on your camp/conference center's past fiscal year 12-month gross operating income or expenses, whichever is greater. You will receive three to 21 individual memberships, depending on the level for which you qualify (see table below).

All individual members receive:

- Subscription to *InSite* magazine and *Thursday Mail* (e-newsletter)
- Discounts on CCCA resources and training events
- Access to the CCCA Member Portal (members-only Web site)
- Access to the CCCA Member Connection
- A listing in the CCCA online individual member directory

The executive individual member also receives:

- Subscription to LeaderCast, a quarterly video briefing from the CCCA President
- Ability to send e-mail ALERTs to other executives (and/or other members)

All memberships are valid for 12 months and must be renewed annually. The CCCA national office will notify you in advance of your renewal date.

10%
Discount for New
Members

According to the chart shown below, enter the annual fee based on your camp/conference's past fiscal year 12-month operating income or expenses (whichever is greater).

\$

Subtract 10 percent from the annual fee if you are a new (never before) CCCA member.

-\$

Total membership fee due with this application:

\$

Category	Past Fiscal Year Operating Income or Expense	Annual Fee	Individual Memberships
<input type="checkbox"/> A	\$0 - \$20,000	\$395.00	3
<input type="checkbox"/> B	\$20,001 - \$40,000	\$459.00	4
<input type="checkbox"/> C	\$40,001 - \$70,000	\$565.00	5
<input type="checkbox"/> D	\$70,001 - \$120,000	\$675.00	6
<input type="checkbox"/> E	\$120,001 - \$170,000	\$779.00	7
<input type="checkbox"/> F	\$170,001 - \$250,000	\$905.00	8
<input type="checkbox"/> G	\$250,001 - \$500,000	\$1,025.00	9
<input type="checkbox"/> H	\$500,001 - \$750,000	\$1,139.00	10
<input type="checkbox"/> I	\$750,001 - \$1,000,000	\$1,259.00	11
<input type="checkbox"/> J	\$1,000,001 - \$2,500,000	\$1,385.00	13
<input type="checkbox"/> K	\$2,500,001 - \$5,000,000	\$1,499.00	15
<input type="checkbox"/> L	\$5,000,001 - \$10,000,000	\$1,615.00	18
<input type="checkbox"/> M	More than \$10,000,000	\$1,735.00	21

Fees effective July 1, 2011.

How will you be paying?*

Step 4

Payment Information

Check enclosed, payable to CCCA

Charge my:

MasterCard

Visa

Discover

American Express

Card number: _____

Expiration: ____ / ____ Security code: _____

Cardholder name (as it appears on card; please print):

Billing address: _____

Cardholder phone number:

(____) _____

Cardholder signature:



A higher standard.
A higher purpose.

Send CC receipt to this e-mail:

***Attention Associate Member Applicants:** Upon approval of your application (please allow two to three weeks for review), CCCA will request your payment for membership. It is preferable that no payment be sent until the application is approved.

Who's who?

Step 5a

Executive Individual Member Information

The person you list in number 1 below will be your first individual member and should be your camp/conference director or primary on-site decision maker.

He or she will receive renewal information unless specified differently under individual member number 2 in Step 5b.

1 Name: _____ Department code: _____
 Home mailing address: _____
 City: _____
 State: _____ Zip: _____ Country: _____

Check this box if mailings should be sent to the home address and not the camp/conference.

Home phone: (_____) _____
 E-mail: _____
 Cell phone: _____
 Spouse's name (if applicable): _____

Department Code Table

Please use this department code table to identify (as closely as possible) each person's area of greatest responsibility. We realize the department codes do not necessarily reflect exact titles.

AD Administration	HR Human Resources
BF Business/Finance	MS Marketing/Sales
FS Foodservice	OR Office/Registration
FR Fund Raising	OP Operations
GS Guest Services	PG Program
HC Health Care	SF Site/Facilities
HK Housekeeping	

If none of the above apply, use one of these:

BC Board Chair	FC Friend of Camp
BD Board Member	OW Owner
DE Denominational Executive	

Note: CCCA desires to collect direct e-mail addresses for the executive and other individual members because e-mail is our primary means of communication. *Thursday Mail*, renewal notices, event notifications and certain other services are delivered via e-mail.

Other Individual Members Information

The number of individual members you can list corresponds to your membership level (see Step 3). You have already listed your first individual member in Step 5a. We suggest you include key staff members as well as anyone else who might benefit, including board members, volunteers and the like. If necessary, photocopy this page prior to listing individual members, as you can list up to 21 individual members, depending on your membership level.

2 Name: _____ Department code: _____
 Mailing address (if different from camp/conference): _____
 City: _____ State: _____ Zip: _____
 Country: _____ Home/office/cell phone: (_____) _____
 E-mail: _____

We prefer that the individual member listed above be our **billing contact** and receive the annual renewal information.

3 Name: _____ Department code: _____
 Mailing address (if different from camp/conference): _____
 City: _____ State: _____ Zip: _____
 Country: _____ Home/office/cell phone: (_____) _____
 E-mail: _____

4 Name: _____ Department code: _____
 Mailing address (if different from camp/conference): _____
 City: _____ State: _____ Zip: _____
 Country: _____ Home/office/cell phone: (_____) _____
 E-mail: _____

5 Name: _____ Department code: _____
 Mailing address (if different from camp/conference): _____
 City: _____ State: _____ Zip: _____
 Country: _____ Home/office/cell phone: (_____) _____
 E-mail: _____

6 Name: _____ Department code: _____
 Mailing address (if different from camp/conference): _____
 City: _____ State: _____ Zip: _____
 Country: _____ Home/office/cell phone: (_____) _____
 E-mail: _____

7 Name: _____ Department code: _____
 Mailing address (if different from camp/conference): _____
 City: _____ State: _____ Zip: _____
 Country: _____ Home/office/cell phone: (_____) _____
 E-mail: _____

Tell us more...

Step 6

Information for the CCCA Membership Directory

One of the member benefits CCCA offers is listing your camp or conference's vital information in the Membership Directory on CCCA's Web site. Thousands of parents, pastors and group leaders consult this guide every month in an effort to find the right program or facility for their children, family or group.

Please complete the following information for the Membership Directory:

1. **Affiliation** (i.e., denomination or parent organization), if any:

2. **We operate the following camp types** (check all that apply):
 - Adventure/wilderness camp
 - Conference/retreat center
 - Day camp
 - Resident camp
 - Trip/travel camps (i.e., bicycle trips, cruises)
 - Work camp
3. **We program** (i.e., develop and operate the program in its entirety) during the summer for the following **age categories** (check all that apply):
 - Children
 - Younger teens
 - Older teens
 - Young adults
 - Adults
 - Families (members together in one program)
 - Families (members separated by age)
 - Senior adults
4. **Throughout the year, we offer one or more weeks of camp with the following emphases/themes** (check all that apply):
 - Aquatic skills
 - Arts/crafts
 - Cheerleading
 - Computer/technology
 - Culinary skills
 - Drama
 - Equestrian skills
 - Gymnastics
 - Leadership development
 - Missions
 - Mountain boarding
 - Music
 - Outdoor education
 - Skateboarding
 - Sports
 - Team building
5. **Throughout the year, we offer one or more weeks of camp exclusively for campers/guests with the following conditions** (check all that apply):
 - Emotional disorders
 - Behavioral disorders
 - Eating disorders
 - Substance abuse
 - Moderately physically disabled (partial care required)
 - Severely physically disabled (full care required)
 - Terminal illness
 - Mentally impaired
 - Visually impaired
 - Hearing impaired
 - Speech impaired
 - Physically/emotionally abused
6. **We offer these recreational facilities** (check all that apply):
 - Archery/rifle range
 - Baseball/softball field
 - Basketball court
 - Beach (lake, river or ocean)
 - Fishing area (lake/stream)
 - Game room/arcade
 - Golf course (miniature)
 - Golf course (regulation)
 - Gymnasium
 - Horseback riding arena/stables
 - Ice skating/hockey arena
 - In-line/roller skating path/area
 - Nature center
 - Paintball course
 - Ropes/challenge course
 - Skateboard park
 - Soccer field
 - Swimming pool (indoor)
 - Swimming pool (outdoor)
 - Tennis courts
 - Tubing/tobogganing run
7. **We rent facilities to the following groups/types** (check all that apply):
 - Children
 - Youth
 - Single adults (upgraded facilities)
 - Married couples (upgraded facilities/double beds)
 - Families (together in one unit)
8. **We have the following camper/guest group capacity:**
 Spring: _____ Summer: _____
 Fall: _____ Winter: _____
9. **We offer these accommodation facilities to campers/guest groups** (check all that apply):
 - Bed & Breakfast
 - Cabins
 - Cottages
 - Dormitory
 - Hotel/motel
 - Lodge
 - Platform tents
 - RV sites
 - Tepees
 - Tent sites
 - Theme housing _____
10. **We allow guest groups to use our kitchen and do their own cooking:**
 - Yes
 - No
11. **Camp/conference slogan**—about 10 words. (Example: "To know Christ and to make Him known.") _____

12. **Additional activities and features:**

Thanks!

Step 7

Routing Information

Please send your completed membership application and any additional paperwork along with your fee. Do not send cash. Check or credit card (MasterCard, Visa, Discover or American Express) payment is accepted.

If you would like to discuss any aspect of your camp/conference membership with a CCCA member relations associate, call (888) 922-2287.

You can expect your membership packet to arrive within two weeks. Publications and other member-related information will follow.

Christian Camp and Conference Association

P.O. Box 62189
 Colorado Springs, CO 80962-2189
 Phone: (888) 922-2287
 Fax: (719) 260-6398
 E-mail: info@ccca.org

Web: www.ccca.org

CCCA reserves the right to decline camp/conference membership for any reason if, in the sole judgment of CCCA, it is determined that the best interests of CCCA would not be served thereby, including a determination that the applicant's purpose/mission or statement of faith are not sufficiently compatible with the values, vision, mission and statement of faith of CCCA. CCCA also reserves the right to discontinue camp/conference membership if information should surface that demonstrates, in the reasonable judgment of CCCA, that a camp/conference member is inconsistent with the values, vision, mission and statement of faith of CCCA. In the event CCCA should decline the camp/conference new member application, a full refund shall be made. In the event CCCA should discontinue a camp/conference's membership, a prorated membership fee shall be refunded.



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