



## MEMBERSHIP INFORMATION

Camp Name \_\_\_\_\_

Director's Name \_\_\_\_\_

Director's Email \_\_\_\_\_

Summer Phone Number \_\_\_\_\_

Summer Address \_\_\_\_\_

Winter Address \_\_\_\_\_

Winter Phone Number \_\_\_\_\_

What County is your camp located? \_\_\_\_\_

What County is your winter office located? \_\_\_\_\_

Are you a member of the American Camp Association? \_\_\_\_\_

Annual dues are \$500 per camp.

Please make checks payable to PACA and mail to:

**PACA**  
**C/O Esther Staum Katz**  
**103 Maplewood St**  
**West Hempstead, NY 11552**

Any questions? Email: [pacampassociation@gmail.com](mailto:pacampassociation@gmail.com)

or call 914-466-9016.

. Visit our website [www.pacamps.org](http://www.pacamps.org)

