



**AMERICAN CANOE ASSOCIATION
ATLANTIC DIVISION**

Camp Committee: Assignment & Retention Sub-Committee
 c/o Mary Greifenberger
 1425 Bellmore Ave.
 N. Bellmore, NY 11710
 516-781-8889
 msmarimac@aol.com



**CAMP FACILITY ANNUAL REPORT
Individual Facility Holder**

DUE by SEPTEMBER 30TH

Facility Holder Name: _____

Facility #: _____ **E-Mail Address:** _____

Address: _____ **Phone:** _____
 Street

_____ **City** **State** **Zip**

Your annual report is due by September 30. All facility holders are required to submit a report, even if you only have a one-year assignment. You and your guests are expected to abide by all items listed in the Facility Holders Agreement. You are expected to meet all of the following 5 requirements. A failure in any of these will result in an unsatisfactory rating for the year.

1. **Fees** All fees (including guest fees) have been paid as required.
 _____(Initial here).
2. **Membership** You must be an ACA member. **ACA #** _____.
3. **Usage** A tent platform must be used at least 15 days and a cabin at least 20 days during the season. **Please attach a facility log showing date of usage. These records will be checked against the camp registration info. (Please mark the facility log info, #3 Usage).**
4. **Work/Participation** Each facility will perform Host & Sanitation at least one weekend during the season. **Please indicate the date duty performed.**

No distinction will be made between camp and division work/participation. Time spent on all committees or Division activities held at Lake Sebago DOES count toward fulfilling this requirement. Any work/participation done that involves payment for services can NOT be considered toward fulfilling this requirement. Any work done in and around a tenant's club facility does NOT count toward fulfilling this requirement. Each facility must have a total of 15 hours of work/participation. **Please submit a list including date, nature of work/participation and hours. (Please mark as #4 Work/Participation)**

(OVER)



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5. **Service/Events** You must be an active member of an ACA Committee.
(National, Divisional, including Activity Committees, Executive, Camp or
subcommittee) **Please list committee name** _____.

OR

You may run a canoe sport program, event or activity at Lake Sebago that is
open to participation by the general membership of the ACA. At least 10 ACA
members must participate. **Please submit a write-up of your event, date held,
and a list of participants.**

Signature: _____ **Date:** _____

For Committee Use

Disposition: _____ **Satisfactory**
_____ **Unsatisfactory**