For Office Use Only
___Date received
___Registration
___Notes

Name_____
First Last

CAMP REGISTRATION FORM

Address_____

City_____ State_____ Zip_____

Birthdate: ___/___/___ M___ F___ Grade going into this fall: _____

Home Church_____

Parent or Legal Guardian's Name_____

Home Phone_____ Alternate Phone_____

Do you have any special requests? **(Please limit your request to one or two people.)**

Cabin Requests	Team Requests **(for first timers or special circumstances)**

Other information regarding the child that would be helpful for the camp staff to know: **(Please put health matters on the health form.)**

_____
_____
_____
_____
_____

Payment is requested with your registration (canteen is included in the fee). However, if you cannot send the money now the camper may bring it with them.

Please mark the camp you would like to attend:

___**Camp 1—grades 9-12** (fee is $70.00)

___**Camp 2—grades 6-8** (fee is $65.00)

___**Camp 3—grades 3-5** (fee is $60.00)