

REGISTRATION FORM

One registration per camper. Duplicate if necessary. Please print clearly.

Camper Information

Name: _____

Mailing Address: _____

City: _____

State: _____ Zip: _____

Cell Phone: _____

Home Phone (*optional*): _____

Email: _____

Birthday: _____ Age: _____ Gender: M or F

Grade entering: _____

Church coming with: _____

Pastor's name: _____

Choose Program Options

- | | |
|---|--|
| <input type="checkbox"/> Junior Camp-For-A-Day: Oct. 24 | <input type="checkbox"/> Teen Camp-For-A-Day: Nov. 7 |
| Ages 9-12 or 3rd-6th grade | Ages 13-18 or 7th-12th grade |

Check Financial Options

- \$20 fee enclosed
- Pay upon arrival