



2008 Family Camp Registration Form

(Please print all information)

PDWC _____
CA/CK# _____
DATE _____

Last Name _____

Address _____

City _____ State _____

Zip _____ Home Phone Number _____ - _____ - _____

Is this your family's first time at Family Camp? Yes _____ No _____

Church camper attends _____

- All children, even highschoolers, must be accompanied by an adult.
- Registration will begin at 5:30 p.m. on Friday evening
- Friday evening "drop-in" meal from 6:30-7:15 p.m. Please mark the box below if you plan to be here.
- Camp ends Monday at 11 a.m.

Fees

Adult (Age Group A) - \$35.00
3-12 years (Age Group C) - \$15.00
Under 3 years—no charge
Faculty/Teachers and their immediate family pay only half of total.

Please call the camp office about fees if just attending for a day. 618-326-7114.

Please check here if you are faculty.

Please check here if you will be eating the Friday evening meal.

First Name	Price Group	Charge

TOTAL COST:

Housing Needs:

Boys Dorm—How many? _____

Girls Dorm—How many? _____

We will be camping in a:

_____ Tent _____ Pop-up camper

_____ Camper Trailer

**There is a limited number of "family" dorm space. Please call about availability.