

# 2019 FAMILY EVENTS REGISTRATION (NOT FOR SUMMER CAMP)

NOT FOR SUMMER CAMP REGISTRATION! SEE PAGE 8!

EVENTS REGISTRATION

Family Camp, Session 1 (Sunday-Wednesday): June 30-July 3 **OR**  Family Camp, Session 2 (Sunday-Wednesday): August 11-14

Please check Housing Request in order of preference (based on availability and needs.)

- Bring your own RV or Tent..... \$130/person or family maximum of \$550
- Platform Tent or Covered Wagon..... \$130/person or family maximum of \$550
- Seeker or Frontier Town Cabin..... \$130/person or family maximum of \$550
- Retreat Center, Koinonia Lodge, Manna Center..... \$150/person or family maximum of \$650
- Log Cabins..... \$150/person or family maximum of \$650

**FAMILY MAXIMUMS APPLY TO IMMEDIATE FAMILY ONLY. Children under 5 by time of camp are free!**

- Grandparent-Grandchild Camp: August 15-17 ..... \$125/Person
- Parent-Child Horse Camp: August 15-17..... \$125/Person

Total Cost \_\_\_\_\_

**Family Members Attending Camp:**

Adult(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Children \_\_\_\_\_

**Credit Card Information**  Visa  Mastercard  Discover

Amount to Charge \$ \_\_\_\_\_

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ CV2# \_\_\_\_\_

Cardholder's Name (printed) \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

Home Church and Town \_\_\_\_\_

Age \_\_\_\_\_ Grade in Fall '19 \_\_\_\_\_

Age \_\_\_\_\_ Grade in Fall '19 \_\_\_\_\_

Age \_\_\_\_\_ Grade in Fall '19 \_\_\_\_\_

Age \_\_\_\_\_ Grade in Fall '19 \_\_\_\_\_

Age \_\_\_\_\_ Grade in Fall '19 \_\_\_\_\_

**Emergency Contact for someone NOT at camp with you:**

Emergency Name \_\_\_\_\_ Emergency Phone Number \_\_\_\_\_

Health Insurance Co. \_\_\_\_\_ ID Number \_\_\_\_\_

Please send this form with at least a \$100 deposit to: Sugar Creek Bible Camp



# 2019 RETREAT REGISTRATION (NOT FOR SUMMER CAMP)

NOT FOR SUMMER CAMP REGISTRATION! SEE PAGE 8!

RETREATS REGISTRATION

**Retreat registering for:** \_\_\_\_\_

First Name \_\_\_\_\_

Last Name \_\_\_\_\_

Male  Female Grade \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_

Phone #1 \_\_\_\_\_

Phone #2 \_\_\_\_\_

E-mail \_\_\_\_\_

Home Church and Town \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_

Emergency Contact Phone \_\_\_\_\_

Roommate Request(s) \_\_\_\_\_

Individual Retreat Registrations are also available on our website:  
www.sugarcreekbiblecamp.org

Health insurance company \_\_\_\_\_

Policy # \_\_\_\_\_

Allergies \_\_\_\_\_

Prescription Meds \_\_\_\_\_

Medical needs \_\_\_\_\_

**If participant is under 18, see below:**

Parent/Guardian Name(s) \_\_\_\_\_

**Parental Permission:** This form is correct as far as I know. The person herein described has permission to engage in all camp activities, except those noted on this form. In the event of an emergency and I cannot be reached, I give permission to the physician selected by the camp to give necessary medical treatment to the person listed above.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

I also give the camp permission to use photos of myself or my child in promotional publications.

Please send this form with at least a \$25 deposit to: Sugar Creek Bible Camp

