

# 2021 FAMILY CAMP REGISTRATION (NOT FOR SUMMER CAMP)

NOT FOR SUMMER CAMP REGISTRATION! SEE PAGE 12!

FAMILY CAMP REGISTRATION

- Family Camp, Session 1 (Monday-Thursday): July 5-8  
 OR  Session 2 (Sunday-Wednesday): August 8-11  
 OR  Session 3 (Thursday-Sunday): August 12-15

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

- Bring your own RV or Tent ..... \$120/person or family maximum of \$500  
 Covered Wagon..... \$120/person or family maximum of \$500  
 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..... \$175/person or family maximum of \$750

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

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

<p><b>Credit Card Information</b> <input type="checkbox"/> Visa <input type="checkbox"/> Mastercard <input type="checkbox"/> Discover</p> <p>Amount to Charge \$ _____</p> <p>Card # _____</p> <p>Expiration Date _____ CV2# _____</p> <p>Cardholder's Name (printed) _____</p> <p>Cardholder's Signature _____</p>
---

**Family Members Attending Camp:**

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

Address \_\_\_\_\_

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

**E-mail** \_\_\_\_\_ Home Church and Town \_\_\_\_\_

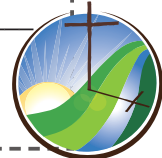
Children _____	Age _____	Grade in Fall '21 _____
_____	Age _____	Grade in Fall '21 _____
_____	Age _____	Grade in Fall '21 _____
_____	Age _____	Grade in Fall '21 _____
_____	Age _____	Grade in Fall '21 _____

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

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

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

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



**SUGAR CREEK**  
BIBLE CAMP