

Outdoor Ministries Registration Form

Use a separate form for each person and for each camp event. ❖ Fill in these blanks only if the camper is under the age of 18.

Please **PRINT or TYPE** the following information:

Camper

C.I.T.

Staff Child

Camper's First Name _____ Last Name _____

Mailing Address _____

City/Town _____ State _____ Zip _____

Home Phone (_____) _____ E-mail _____

Cabin Request (not all camps can honor cabin requests): _____

Name or Nickname your child prefers to be called (may be used for name tags): _____

T-Shirt size: Youth: Small Medium Large X-Large **or** Adult: Small Medium Large X-Large 2X-Large

Date of Birth ____/____/____ ❖ 2009-2010 School Grade _____ Male Female

Check here if this is your camper's first camp experience at either Pilgrim Park or Tower Hill Camp

❖ Mother/Guardian _____ Primary Parent/Guardian? Yes No

Home Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ Email _____

❖ Father/Guardian _____ Primary Parent/Guardian? Yes No

Home Phone (_____) _____ Work Phone (_____) _____

Cell Phone (_____) _____ Email _____

For planning purposes, are there any concerns or dietary needs that we should be aware of? Yes No

Please explain _____

Church Name _____ City/Town _____

Camp Event Desired: First Choice Code # _____ Camp Title _____

Second Choice Code # _____ Camp Title _____

To Register: A \$50.00 deposit is required per camper per event to guarantee a spot at camp. **Only one \$50.00 deposit per family is required for Family camps.**

By Mail (Registrar, Illinois Conference Outdoor Ministries, 26449 1340 N Ave, Princeton IL 61356-8790)

*Please make your check payable to **Outdoor Ministries***

Pay by Check: Check Number _____ Amount \$ _____

By Phone (815/447-2390) or **Fax** (815/447-2205) or **Mail**

Charge my (check one) Visa MasterCard Amount \$ _____

Card Number _____ Exp. Date _____

Signature _____ Date _____

Name Printed on Card _____

Mailing Address _____ Zip _____

If your church is going to assist your camper financially, fill in the amount they will be responsible for: \$ _____
(If no specific amount is filled in, the parent/guardian will be held responsible for the total fee.)

Pastor's Signature _____ Date _____

(Pastor's signature is required if the church is responsible for a portion on the camper's fee.)

Signature Required

I confirm that the information provided is correct to the best of my knowledge. I understand that a \$50.00 deposit is required per camper at registration in order to guarantee a spot at camp. I understand that if I find it necessary to cancel my registration, cancellations must be made at least two weeks prior to the event in order for me to receive a refund and that a \$25.00 will be held as a cancellation service fee.

Signature _____ Date _____