



Camp Registration Form

Lake Louise United Methodist Camp

ONE FORM FOR EACH CAMPER, PLEASE PRINT IN INK

Camp Session _____ Camp Date ____/____/____

Camper's Last Name _____ First Name _____
(Required for camp communications)

Camper's Email Address _____ Male Female

Camper's Birth Date ____/____/____ Grade Completed June 2008 _____

Bunk Buddy _____ **(Both campers must list each other to be bunk buddies.)**

Are you a first time camper? Yes No T-Shirt Size S M L XL 2X
(Circle One)

How did you hear about Lake Louise? _____

Parent/Guardian Name _____
(Required for camp communications)

Street Address _____

City _____ State _____ Zip Code _____

Parent/Guardian Email Address _____

Home Phone (_____) _____ Bus. Phone (_____) _____

Local Church _____ City _____

NOTE: Signature grants permission for camper name, address and telephone number to be released to other campers, and photographs or video images to be used for promotional purposes, unless instructed otherwise by the parent/guardian.

Cost of Camp: _____ Amount Enclosed \$ _____
(Refer to Camp Schedule for Pricing)

Check/Money Order # _____

**Camper's Signature (if 18 or older) or
Parent/Guardian Signature** _____

Send this form with a minimum deposit of \$75 for each camper to:

Camp Registration, Lake Louise United Methodist Camp, 11037 Thumb Lake Road, Boyne Falls, MI 49713.

Make checks payable to Lake Louise United Methodist Camp.

The registration form must be filled out completely and accompanied with the minimum deposit of \$75 for each camper in order to register. Registrations are accepted until camp is full. Deposit is non-refundable. Registration must be paid in full at the check-in at the beginning of camp.

CREDIT CARD INFORMATION

Card Type: _____

Card Number: _____

Expiration Date: _____

Security Code: _____

Signature: _____