

Camper Registration Form
2011 Olympic Lutherhaven Youth Bible Camp
Week of August 6 -11, 2011

Name: _____

Age: _____ Grade Completed: _____ Male: Female:

Name: _____

Age: _____ Grade Completed: _____ Male: Female:

Name: _____

Age: _____ Grade Completed: _____ Male: Female:

Parent's Names: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number(s) including area code:

Home Work Cell _____ Dad Mom Other

Home Work Cell _____ Dad Mom Other

Home Work Cell _____ Dad Mom Other

Home Work Cell _____ Dad Mom Other

Home Work Cell _____ Dad Mom Other

Name of Church (If Applicable): _____

Please specify tee shirt size and any preference when it comes to fellow campers, or any special concerns about cabin placement, please indicate here (preferences are not guaranteed):

Yes, I am interested in being an adult volunteer. (Camper fees are waived for up to 2 children of all full time volunteers. Full time volunteers must stay at camp all week, even overnight, in order to get the camper fee waived.)

Check here if you do not want your children's pictures (no names will be released) used in camp advertisements or promotions.

I have read and understand the Olympic Lutherhaven Youth Bible Camp Camper and Counselor Rules. I have explained them to each of my children attending camp and/or have provided them a copy to read.

Parent/guardian Signature _____ Date _____

Please mail the registration, medical release form, and a \$20 deposit or full payment, for each camper by **July 18, 2011**. Make **checks payable to Lutherhaven Youth Camp**.

Mail to:
Lutherhaven Youth Bible Camp
c/o Larry Ficca
12479 Mt. Worthington Loop
Silverdale, WA 98383