

**ADULT & FAMILY CAMP REGISTRATION
JUNE 17-24, 2012**

MEAL/ACTIVITY RATE

Youth /Adult (Ages 11 and up)
Children (Ages 4-10)
Toddlers (Ages 1-3)
Infants (Under 1)

FULL-TIME CAMPERS

\$175
\$120
\$55
\$0

PART-TIME CAMPERS

\$50 per day
\$30 per day
\$20 per day
\$0

ROOM CHOICE (list first and second choices)

Lodge Room (3 bunk beds, sink in room) \$480 per week
(Priority given to families with children under 8)

Silver Creek Cabin (4 bunk beds, community bathroom) \$480 per week

Personal RV \$380 per week

OTHER REQUESTS

Need wheelchair access _____

Willing to share a room to reduce rate _____

No room needed will stay with _____

Request extra bed set-up _____

Request bedding (\$8 per bundle) how many bundles? _____

Vegetarian meals specify which camper _____

Diet restrictions (form can be found at www.familycamp.org)

Need Campership – How much are you requesting? _____

CAMPER'S NAME

(List each participant)

AGE

(at start of camp)

Arrival Date

Departure Date

Meal/Activity

(per person)

1. _____	_____	_____	_____	\$ _____
2. _____	_____	_____	_____	\$ _____
3. _____	_____	_____	_____	\$ _____
4. _____	_____	_____	_____	\$ _____
5. _____	_____	_____	_____	\$ _____
6. _____	_____	_____	_____	\$ _____

Signature: _____

Address: _____

Email: _____

Phone: (____) _____

Date: _____

Total Meal/Activity: \$ _____

Room Fee: \$ _____

Bedding: \$ _____

Campership Donations: \$ _____

Grand Total: \$ _____

Amount Enclosed: \$ _____
(min. \$100 deposit)

Balance Due: \$ _____

Make Checks Payable to: CA-NV Annual Conference
Mail to: Elaine Bradbury, Camp Registrar,
2034 Bristol, Stockton, CA 95204