

SUMMIT CAMP 2010 Group Registration Form

A copy of this form is DUE by June 21st

Circle one:

Week 1 - June 28-July 2
Week 2 - July 19-23

(Summit Camp requires 1 adult sponsor per 8 campers)

Church _____

Contact Person _____ Title _____

Work Phone _____ Home or Cell Phone _____

Fax number _____ E-Mail _____

NAME	M	GRADE Completed as of June/2010	C Camper	Physical Medical Form	Release Form	T-Shirt (Adult) Size	\$50 Deposit	AMOUNT
	F		S Sponsor	Yes	Yes	S M L XL XXL	PAID	DUE
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Duplicate as needed