

2010 Cedarkirk Summer Camp Registration Form

Camper Information

Last Name: _____ First Name: _____ Preferred Name: _____
Street/P.O. Box: _____ City: _____ State: _____ Zip: _____
Gender: _____ Date of Birth: _____ Grade Finished by 6/13/2010: _____

Roommate request: _____ (campers must request one another) T-Shirt Size: YM YL S M L XL 2XL

Family Information

Parent/Guardian Name(s): _____ Relationship: _____
Daytime #: _____ Evening #: _____ Cell #: _____

Address (if different from camper): _____

City: _____ State: _____ Zip: _____ Email: _____

Please check here if you would prefer to receive confirmation materials by standard mail rather than by email.

Church Information

Your Church Name: _____ City: _____

(Please note that for all those attending PC(USA) churches in Tampa Bay and Peace River Presbyteries, a church signature is required on the Parent/Guardian Permission form (sent with the confirmation materials) to receive the listed price. All others pay an additional \$25 per camp session.

Registration Information

Please provide an alternate choice in case your first choice fills and check the box indicating it is an alternate choice. **A \$50 non-refundable deposit for each camp desired must be received with this application.**

1st Choice Camp Session # and Name: _____ Dates: _____ to _____ Cost: _____

2nd Choice Camp Session # and Name: _____ Dates: _____ to _____ Cost: _____

You and Me Campers Only - List names, ages, and gender (or A for adults over 18) for ALL family members attending:

