## Joy El Camps & Retreats

Registration Form (PRINT clearly)

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Name			•	Marketing	Code		
Address				Gender			
City			State	Zip			
Home Phone	Student Cell Phone	Birth Da		e			
School			Grade Cor	npleted as of	June 2017		
Parent/ Guardian Name(s)		Parent Hon	ne #				
Parent Day Phone (if different from ho	me #)	Parent Cell	#				
Parent Email (Required to send confin	mation information)						
Emergency Contact (other than paren	t)	Contact Ph	one #				
Church Name							
Church Address							
Pastor's Name	astor's Name Church Phone #			Church Email			
Cabinmate Request (one choice only)							
I have never been to Joy El Camps & Rqualify):	etreats & I was invited by (	one choice only -	members o	of the same h	nousehold do not		
Samp Week – 1 <sup>st</sup> choice Camp Week attes Dates			- 2 <sup>nd</sup> choice				
Day campers – Indicate week/pick-up Week #	ocation	dult: S M L XI	_ XXL				
How did you hear about us?  Discount Jan Ovnt pd in full	. 50 1: ( !!				1.50 1: ( !!		
I am registering multiple children financial award. I am requesting financial assistar Please check here if you would like to	therefore because I arnce.	m in financial no	eed, I am i				
Parent Consent Statement  In signing this application, I  I give permission to use pho  I understand that providing I  As a parent/guardian of _ discharge Joy El Camps & I claims, and actions, arisin conducted by and/or unde harmless Joy El Camps & E another individual during I  I understand that all regist	Retreats, its agents, em g now and/or in the fut er the auspices of Joy E tetreats from any claims the course of his partici	in print and inter by El permission(camper nai ployees, succe ure, out of my c l Camps & Retre s arising out of a ipation in campi	net publicit to send me me), I here ssors and child's part ats. I furthe any injury	news and evelop fully was assigns, from in the control of the cont	ent information. ive, release and om any and all rights, camping activities ndemnify and hold		
Signature of parent or guardian of Credit Card Information	must appear in ink	Card Type	e: Visa / Ma	- estercard / Dis	Today's Date		
Name on Card:		Order Date:			Cost:		
Credit Card #:		Expiration D	ate:		CID:		

Order taken by: