2019 CGBC CHURCH CAMP REGISTRATION

Registration Amount (Early bird registration ends by <u>05/05</u> . \$10 person, if require transportation.) \$10 Discount for first time CGBC Church Camp attendee									
	Full Time		Par						
Age Group	By 05/05/2019	05/06/2019 Or Later	By 05/05/2019	05/06/2019 Or Later	Van Fee				
Senior (70 & Up)	\$105	\$115	\$105	\$115	\$10				
Adult (18 & Up)	\$185	\$195	\$135	\$145	\$10				
Teen (12~17)	\$155	\$165	\$105	\$115	\$10				
Child (5~11)	\$130	\$140	\$90	\$100	No Charge				
Toddler (1~4)	\$60	\$70	\$50	\$60	No Charge				
Baby (Under 1)	No Charge	No Charge	No Charge	No Charge	No Charge				

A room key is not normally provided, but can be obtained with a \$75 deposit to Simpson University.

A room is not guaranteed if you register after 5/12/2019

_ast Name:									
Address :		· · · · · · · · · · · · · · · · · · ·							
Email:					Phone:				
Registrants Last Name	(Print in English) First Name		Re	lation	Age	Grade	Part Time?	Cost	
1.			□ □ (Se	elf)					
2.		1							
3.		1							
4.		1							
5.		1							
6.		1							
☐ I can provide transportation for people					Transportation \$				
-	ation (cost: \$10 per pers	-				Of	fering \$		
☐ I need financial aid of \$ (attach supplemental form)					Total \$				
Preferred Roomma	ate :								

PREFERRED DINING SEATING

Please check one, we will try to accommo ☐ First Seating (Lunch 12-1pm, Di ☐ Second Seating (Lunch 12:30-1	nner 5:30-6:30pm)			
EMERGENCY C	CONTACT INFORMATION			
Name:	Relation:			
Day-time Ph:	Evening Ph:			
Name:	Relation:			
Day-time Ph:	Evening Ph:			
Do you have any allergies or regular m	edications? (Please fill below)			
SPE	CIAL NEEDS			
[Family Waiver Statement] By sign sign), agree (and have directed my have forth by the CGBC Church Camp directed my family to cooperate and of the Church Camp Committee reservamp and reject my application next to the Camp rules and guidelines. Posted on the web for self download	gning this form, I,			

Check #: Registration Date: