

CAMP 2018

August 30- September 2, 2018

REGISTRATION

-Please print out and fill out this registration form **and** turn it in to Kathy Cisler in the church office. Registration requires a \$50.00 deposit. We will accept registrations as space allows until July 30. Fee balances are due by August 12.

Adults: _____

Children:(ages and grades too, please) _____

Address: _____

Phones: _____

e-mails: _____

HOUSING ARRANGEMENTS

We have some variety in accommodations at Camp, and we would like to make everyone as comfortable as possible. Please indicate your preference below to help us with cabin assignments. The newer cabins work best if they are shared, so if you are willing to share, please indicate that. We will do the very best we can in making assignments based on numbers and the needs of our campers.

_____ We/I would like to share a cabin with _____.

We/I checked with them and they agreed to share with us/me.

(*Please have them indicate your name on their registration form.)

_____ We are willing to share a cabin but don't have anyone in mind.

Please find people with whom we/I could share.

_____ We don't think sharing will work well for us.

_____ We/I would like to talk to someone about other options.

FEES

Westminster is your all-inclusive resort! Lodging, meals, snacks, entertainment, and spiritual enrichment are all included in the price!
Children ages 3 and younger are free.

_____ X \$132 = _____
Number of campers Total

NOTE: We encourage you to come on Thursday so that you can take part in the “get acquainted” time that evening and be part of all activities. However, if your schedule or health does not allow for the whole time, we have adapted fees for shorter stays.

2 nights = \$95

1 night = \$57

1 day = \$34

All rates reflect the 10% WPC discount.

-We do have a budget line that could help make camp more viable for you. Please contact Nancy Greidanus <mailto:nancyg@wpcgr.org> or Deb Larson debslarson@comcast.net if that could help you make a decision about camp!

A \$50 non-refundable deposit is required with this registration. Pay through our church system or make a check out to Westminster Presbyterian Church.

AMOUNT PAID \$ _____ BALANCE DUE \$ _____

Let us know the days and **times** of your arrival and departure

____ Thursday evening _____ pm _____ Saturday _____ am _____ pm

____ Friday _____ am _____ pm _____ Sunday

Please describe any dietary restrictions: _____