Contact Person:_____
Mailing Address:_____
City/ST/Zip:_____
Phone:(____)_____Other Phone:(____)_____
E-mail_____

CHURCH_____
Pastor:_____
Church Address:_____
Church City/ST/Zip _____
Pastor/church e-mail_____
☐ *Include pastor/church on mailing list*

☐ *Include me on Dry Creek's mailing list*
☐ *home address* ☐ *church address*
I am _____ at our church.
(ex. Youth Dir., Children's Dir., Secretary, etc.)

DRY CREEK BAPTIST CAMP
ADULT RETREAT
REGISTRATION FORM

IMPORTANT! PLEASE CIRCLE THE RETREAT FOR WHICH YOU ARE REGISTERING:

Men's Retreat Sportmen's Wild Game Supper* Ladies Retreat
**deposit not required, but please register*
Sr. Adult Retreat

Name	Mailing Address	City/St/Zip	Phone	Sex	Commuting or Lodging

Please enclose a deposit of $10 per person. Balance may be paid at retreat. Mail to:
Dry Creek Baptist Camp ~ P.O. Box 580~Dry Creek, LA 70637~(337) 328-7531

TOTAL PRE-REGISTRATION ENCLOSED $_____