

Camp _____

(camp session you're attending. Example: GA, Preteen II)

DRY CREEK BAPTIST CAMP OFFICIAL SUMMER REGISTRATION FORM 2009

Person sending form _____

Mailing address _____

City/State/Zip _____

home phone(_____) _____ other phone(_____) _____

e-mail _____

- Include me on Dry Creek's mailing list** *Use home address to receive summer camp information.* *Use church address*
- I am Youth Leader at our church.*
- Other church position:*

ABOUT REGISTRATION:

~ No registrations accepted by fax, e-mail, or phone.

~ **DO NOT SEND INCOMPLETE FORMS**

Confirmations and receipts will not be mailed, nor campers registered until all information is complete.

~ Use a separate registration form for each camp session.

~ All campers/counselors must be pre-registered. **Do not bring extra, unregistered campers to closed (full) camps.**

~ For full camps, camper exchanges must be of same gender.

ABOUT DEPOSITS:

~ Enclose **exactly \$50 per camper and counselor**. Please do not send more or less. Deposits may be paid by cash, check, or credit card.

~ **CAMP FEE BALANCE IS TO BE PAID DURING REGISTRATION.**

~ **Campers are not registered until deposit is received.**

~ By **4pm the THURSDAY BEFORE** camp begins, call the office to report changes, additions, and/or deletions to avoid loss of deposit. **Deposits are non-refundable and non-transferable after this time.**

~ Deposits will not be accepted for un-named campers.

ABOUT COUNSELORS:

~ **Each camper without a counselor will be charged an additional \$15.00.**

~ Churches, PLEASE send 1 adult counselor for boys and 1 for girls.

To avoid displacing campers, please limit adult counselors to 1 for each 7-8 campers of the same gender.

Children's camp counselors must be at least 18, youth camp counselors at least 21. Only 1 assistant counselor (age 15 or older) per gender group is allowed and must accompany the adult counselor.

~ Counselor fees are the same as camper fees.

~ Each **camper** and **COUNSELOR** must submit a Dry Creek Camp Health Form during registration. **Please do not mail these. Bring them with you on registration day.**

Church Name _____

Your pastor _____

Church mailing address _____

City/State/Zip _____

Church Phone (_____) _____

church or pastor e-mail _____

Please put pastor/church on mailing list.

office use only

Date couns pkt or individual pkt mailed ___/___/___

Pre-camp changes. Notes:

COUNSELORS:

	Med Form	Amt Paid	COUNSELOR NAME
E X A M P L E			MAILING ADDRESS
	Age	Sex	CITY/STATE/ZIP
	#	F/M	PHONE - Please include area code

E-Mail: If private or unavailable put N/A in this space. Cell or other phone:

	Med Form	Amt Paid	
	Age	Sex	
1			()

E-Mail: _____ Cell #: _____

	Med Form	Amt Paid	
	Age	Sex	
2			()

E-Mail: _____ Cell #: _____

	Med Form	Amt Paid	
	Age	Sex	
3			()

E-Mail: _____ Cell #: _____

CAMPER SPACES ON BACK

1

office use only below office use only below office use only below office use only below

office use only below office use only below office use only below office use only below

Date Reg. Rcvd. ___/___/___ Conf. Letter sent _____

Receipt #(s) _____ Date(s) Rcvd. _____ Amount(s) Rcvd: _____

CAMPERS: COMPLETE ALL INFO

	Med Form	Amt Paid	CAMPER NAME
			MAILING ADDRESS
Last Grade Completed	EXAMPLE		CITY/STATE/ZIP
	Sex	Age	(Phone) Please include area code
#	F/M	#	PARENT/GUARDIAN NAMES
	Med Form	Amt Paid	
Last Grade Completed	1		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	2		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	3		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	4		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	5		
	Sex	Age	

CHURCH Camp Session Attending:

	Med Form	Amt Paid	
Last Grade Completed	6		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	7		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	8		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	9		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	10		
	Sex	Age	
	Med Form	Amt Paid	
Last Grade Completed	11		
	Sex	Age	

Send completed 2009 Official DCBC Registration Forms to:
 Dry Creek Baptist Camp~P.O. Box 580~Dry Creek, LA 70637
 Questions? (337)328-7531 or dbcamp@aol.com
 Do not register by e-mail, fax or phone.
 Mail deposit with COMPLETED form.

file:c:\myfiles\sumr reg form 09D.wpd.elmo

*Please call for additional forms if you are unable to make copies.
 Or, you may download them from www.drycreek.net*