

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

<input type="checkbox"/> Include me on Dry Creek's mailing list <input type="checkbox"/> home address <input type="checkbox"/> church address I am _____ at our church. (ex. Youth Dir., Children's Dir., Secretary, etc.)

DCBC YOUTH RETREAT REGISTRATION FORM

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

Preteen Retreat Father/Son Retreat

Counselors:

** For Preteen Retreat Counselors please include age if less than 25*

NAME	MAILING ADDRESS	CITY/STATE/ZIP	AGE*	SEX

Campers:

**This info not needed here for Father/Son Retreat*

Name	Mailing Address	City/State/Zip	Age	Sex	Grade	Parent Name/Phone

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 \$ _____