



## Got Spirit? - Family Camp Registration Form

**Family Camp check-in and continental dinner begins October 7, 2011 at 5:30 pm until 7:30 pm**

Each family will please complete a separate registration form. If several families are coming as a group from one church, please submit your registration form to the coordinator from your church. The church can then mail your registration forms along with others from the church and handle the matter with one payment. Participating families who wish to register separately may do so with this form and mail with payment directly to Pilgrim Pines. *Please note that this is a family event and families will be assigned housing together. If churches wish to share cabins please note this on the registration form.*

**Family Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Street or Mailing Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**Alternate Phone** \_\_\_\_\_ **Email** \_\_\_\_\_

**Church** \_\_\_\_\_

Please list all participants below and note whether they are an adult, youth, child, or infant:

Names:	Adult, Youth, Child, or Infant	Names	Adult, Youth, Child, or Infant
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Fee categories are as follows: **Adults:** 14 and older, **Youth:** 8-13, **Child:** 4-7, and **Infants** 3 and under are free  
**Subsequent members of a family (within each age group) receive a discounted price.**

First Member <u>By Age Group</u>	Next Member <u>By Age Group</u>	Additional Member(s) <u>By Age Group</u>	
Adult \$110.00 _____,	Adult \$85.00 _____,	Adults \$60.00 _____	<b>Total</b> \$ _____
Youth \$60.00 _____,	Youth \$50.00 _____,	Youth \$40.00 _____	\$ _____
Child \$40.00 _____,	Child \$30.00 _____,	Children \$30.00 _____	\$ _____
Infants _____	3 years old and under are free		_____
Late registration fee of \$10 per person if received after September 19, 2011			\$ _____
<b>TOTAL DUE</b>			\$ _____
<b>TOTAL ENCLOSED</b>			\$ _____

**\* Please Note: Minors, below the age of 18 must have one adult in their sleeping quarters.**

If paying by credit card, please provide following information in full.

Name \_\_\_\_\_, Card Number \_\_\_\_\_

Expiration date \_\_\_\_\_ 3-digit security code \_\_\_\_\_ Amount to be charged \$ \_\_\_\_\_

Signature Authorizing Credit Card Charge \_\_\_\_\_ Date \_\_\_\_\_

Please list any specific food requests, allergies, dietary needs, or other special needs to be considered, *please include restrictions on gluten, lactose, animal products, peanuts or nuts, etc,* \_\_\_\_\_

Registrations will be filled on a first come basis based on availability. For further information please contact Pilgrim Pines at (909) 797-1821, ext. 226 or (800) 616-6612 or e-mail June Boutwell, [juneb@pilgrimpinescamp.org](mailto:juneb@pilgrimpinescamp.org)



# PILGRIM PINES

CAMP AND CONFERENCE CENTER



## Got Spirit? - Family Camp Registration Form Combined Church Registration Form

Churches organizing a group of families to attend Family Camp can combine their participants on one of these forms. Each Family will need to fill out their registration form and the church can then combine their registrations with this cover form and submit by mail or FAX (909-797-2691) all paper work to Pilgrim Pines and the payment can then be mailed. ***This form is due at Pilgrim Pines by September 19, 2011.*** Corrections can be made up to two weeks prior to October 7, 2011.

<u>Family Name</u>	<u># Adults</u>	<u># Youth</u>	<u># Children</u>	<u># Infants</u>	<u>Check #</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

\_\_\_\_\_ Check(s) enclosed totaling \$ \_\_\_\_\_

Attach to this form to all of the family registration forms and mail to:

**Pilgrim Pines Camp, Attn: Registrar, 39570 Glen Road, Yucaipa, CA 92399  
Or FAX the information to Pilgrim Pines Camp at (909) 797-2691 and mail the checks.**

If the family has already mailed their registration form, simply put their name on this form and note under the check number that they have already submitted their registration. **ALL REGISTRATIONS AND PAYMENTS ARE DUE By SEPTEMBER 19, 2011. REGISTRATIONS AND PAYMENTS RECEIVED AFTER THAT DATE WILL BE CHARGED A \$10 PER PERSON LATE REGISTRATION FEE. CANCELLATIONS RECEIVED AFTER SEPTEMBER 30, 2011 WILL BE CHARGED A 25% FEE.**

Office Use Only: Date \_\_\_\_\_ Check # \_\_\_\_\_ Amount \$ \_\_\_\_\_ Date Received \_\_\_\_\_