

**FAMILY CAMP REGISTRATION FORM**

**JULY 12 - 20, 2008**

**We accept Visa & MasterCard**

Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ Email: \_\_\_\_\_  
 Arrive: \_\_\_\_/\_\_\_\_/\_\_\_\_ Depart: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Number of People in Group: \_\_\_\_\_

**Attention All Campers:**

- (a.) Check-in **required** before occupying the room.
- (b.) Registration begins: **9:00 A.M. E.S.T. February 5, 2008.**
- (c.) Minors attending Family Camp without parent/guardian are required to have this registration form signed:

\_\_\_\_\_  
 Parent/Pastor

\*\*\*\*\*

**\$50.00 deposit required to validate a reservation.**  
 Phone reservations will be honored 7 days.

Linens are available for \$10.00 / person.

**Return Form and Deposit made Payable To:**  
**Bethel Park Retreat Center**  
 P.O. Box 480  
 Bridgman, MI. 49106  
 Phone: 269-465-6669 Fax: 269-465-4705  
 Email: [staff@bpcamp.com](mailto:staff@bpcamp.com)  
 \*Please complete backside Emergency Contact Info.

**10% OFF IF RESERVATION IS PAID  
 IN FULL BY: MARCH 5, 2008**

Circle One: Visa or MasterCard  
 Card No: \_\_\_\_\_  
 Exp Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Amt. Auth.: \$ \_\_\_\_\_  
 Memo: \_\_\_\_\_

<input checked="" type="checkbox"/>	ACCOMODATIONS	DAY	CAMP	OCCUP.
<input type="checkbox"/>	Palace #1, #4 & #6	12.00	84.00	2
<input type="checkbox"/>	Palace #2	16.00	112.00	4
<input type="checkbox"/>	Palace #3 & #5	14.00	98.00	3
<input type="checkbox"/>	Loenser Cottage	38.00	266.00	7
<input type="checkbox"/>	Zeller Cottage	38.00	266.00	5
<input type="checkbox"/>	Keller Motel #5 - #9	15.00	105.00	4
<input type="checkbox"/>	Shady Nook #10	32.00	224.00	8
<input type="checkbox"/>	Elim Motel #12 - #23	15.00	105.00	4
<input type="checkbox"/>	Sp. Dorm #1, 5, 8, 12, & 13	30.00	210.00	4 - 5
<input type="checkbox"/>	Sp. Dorm #2, 3, 9, 10, & 11	28.00	196.00	3 - 4
<input type="checkbox"/>	Sp. Dorm #4, #6, & #7	27.00	189.00	2
<input type="checkbox"/>	E.T. Motel #28 & #35	34.00	238.00	6
<input type="checkbox"/>	E.T. Motel #29 - #34	28.00	196.00	2 - 4
<input type="checkbox"/>	Condo #36 - #43	34.00	238.00	6
<input type="checkbox"/>	Limited RV Spaces are available.	15.00	105.00	N/A

**Office Use Only:** DR \_\_\_\_/\_\_\_\_/\_\_\_\_ C#: \_\_\_\_\_ R#: \_\_\_\_\_ #OC: \_\_\_\_\_ Amt: \_\_\_\_\_

COMPLETION MANDATORY!!

IN AN EMERGENCY, PLEASE NOTIFY:

1. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

2. \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

3. Do you have medical concerns we should know of? (YES) \_\_\_\_\_ (NO) \_\_\_\_\_  
IF yes, Please describe: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

4. When the designated persons are unreachable, I authorize Bethel Park Retreat Center management to act in my behalf.

\_\_\_\_\_  
Signature