



Please send registration form and registration fee for each person to:

Servant's Heart Camp
422 Servants Heart Dr.
Ramey, PA 16671
814-497-4100
info@shcm.org
www.shcm.org

Tear here

REGISTRATION

Contact Person: _____
Church: _____
Pastor: _____
Email: _____ Phone: _____

1. Name: _____
Address: _____
Email: _____ Workshop: _____

2. Name: _____
Address: _____
Email: _____ Workshop: _____

3. Name: _____
Address: _____
Email: _____ Workshop: _____

4. Name: _____
Address: _____
Email: _____ Workshop: _____

5. Name: _____
Address: _____
Email: _____ Workshop: _____

6. Name: _____
Address: _____
Email: _____ Workshop: _____

7. Name: _____
Address: _____
Email: _____ Workshop: _____

8. Name: _____
Address: _____
Email: _____ Workshop: _____