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REGISTRATION

Pick Your Week: ___ July 1-3 ___ July 4-6

Last Name: _____

Husband: _____

Wife: _____

Address: _____

City/State/Zip: _____

Phone: _____

Email: _____

Church: _____

Pastor: _____

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Child's Name: _____

Gender: M / F DOB: ___ / ___ / ___

Please send this registration form and a \$50.00 deposit to:

Servant's Heart Camp
422 Servant's Heart Drive
Ramey, PA 16671

Lodging Options: ___ Our Cabin
___ Your Tent
___ Your RV