



SUMMER CAMP REGISTRATION

NOT FOR DISTRICT CAMP REGISTRATION

1501 NW 24th St.
 Oklahoma City, OK 73106
 (405)530-2035
 fax: 405-530-2049

Camp Code: _____ Camp Date: _____

Has your information changed from last year? Yes No
 Go green! May we contact you via E-mail? Yes No

First and Last Name: _____

Date of Birth: _____

Grade in Fall: _____

Gender: Male Female

Parent or Guardian Name(s): _____

Address: _____

City: _____

State: _____

Zip: _____

Day Phone: () _____

Evening Phone: () _____

Cell/Other Phone: () _____

E-mail: _____

Church Denomination: _____

Church Name: _____

Circle one: Camper Leader Leader in Training Dean Shepherd (Sonshine ONLY)

T-Shirt Size: Youth-Small Youth-Medium Small Medium Large XL XXL

Roommate: _____

*Be sure to fill out the health form on page 13-14. It must be filled out completely for both minors and adults.

*If you'd like to pay by credit card, fill-out and send in the coupon on page 25
 (at the bottom of the inside back cover page) with this completed registration form.

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OFFICE USE ONLY

Health Form

Ropes Form

Registration Form

Health Signature

Ropes Signature

Rec. Letter