

Lutheran Lakeside Camp Registration Form

(Please use dark ink.)

Revised Oct 2009

Name (in ink) _____ Birthdate _____ Sex: M/F Grade Completing _____

Address _____ City _____ State _____ Zip _____

Parent/Guardian Name _____ Choice of one cabin mate _____

Home Phone (_____) _____ Work Phone _____ Other Phone _____

Emergency Name _____ Emergency Phone _____

Email _____ Home Church _____ Church Town _____

Program I am registering for _____ Camp Date _____

Second Choice _____ Alternate Date _____

Bus Request (Weeks 2 & 3 only) _____ Yes _____ No _____ Pick up point _____

Bus Week 2 June 13-18 starts in Eldridge, IA, Bus Week 3 June 20-25 starts in Bettendorf, IA

Signature of parent/guardian of camper _____ Date _____

Credit Card Payment: _____ Visa _____ Mastercard _____ Card # _____ Expiration Date _____

Dollar Amount (i.e. \$100 deposit or full fee) _____ Cardholder's Signature _____

Deposits are non-refundable.

Additional forms are available at www.lutheranlakeside.com Register early and save. Camperships are available for anyone in need of financial assistance. Contact camp office or write on your registration form your request. Many churches *offer* camperships to their members - please check with your church office.

I agree that the camp and its staff will not be held responsible for accidents or personal injury arising there from. I also give permission for any photograph taken of my child to be used for camp promotional purposes for Lutheran Lakeside Camp and ELCA Outdoor Ministries. _____ (Parent/Guardian Signature)

This camper is not covered by family medical/hospital insurance. I/we will cover the cost of health care for my child should the need arise while my child is attending camp _____ (Parent/Guardian Signature)