

COUNSELING GROUP RESERVATION FORM

Church Name _____ Church City _____

Coordinator _____ Coordinator Phone _____

Coordinator E-mail _____

Week Attending: 1 2 3

Gender: Male Female **Group #** _____ of _____ Total Groups

- Camper Registration and Counselor Application forms, including CITs, must be paper-clipped to this form to guarantee their housing assignment.
- Please fill a separate form out for every counseling group, separating the genders.
- Camp Fees: Campers: \$226 each; Counselors & PCAs: \$100 each; CITs \$150 each; Fee for not providing counselor: \$125 (see Registration Information Sheet for more info)

NAME	Camp Fee	Scholarship (-\$50)/ Late Fee (\$40)	T-Shirt Cost (\$12)/Size	Pre-paid Spending Money	Total Paid
Counselor (notate if not sending)			/		
Counselor/CIT (if desired)			/		
1.			/		
2.			/		
3.			/		
4.			/		
5.			/		
6.			/		
7.			/		
8.			/		
TOTAL	\$	\$	#	\$	\$

FOR OFFICE USE ONLY Amount Paid: \$ _____ Check # _____ Paid by: _____
 Balance Due: \$ _____ Date Paid: _____ Entered into spreadsheet Background check Copied for nurse for under 18
 If X'ed above, don't add forms to packet until they match