

# COUNSELING GROUP REGISTRATION FORM

Church Name \_\_\_\_\_ Church City \_\_\_\_\_

Coordinator \_\_\_\_\_ Coordinator Phone \_\_\_\_\_

**Week Attending:** 1 2

**Gender:** Male Female      **Group #** \_\_\_\_\_ of \_\_\_\_\_ Total Groups

- Camper Registration and Counselor Application forms, including CIT's must be paper-clipped to this form to guarantee their spot.
- Camp Fees: Campers: \$190 each; Counselors: \$35 each; CIT's \$100 each

NAME	Camp Fee	Scholarship Discount	T-Shirt Fee	DVD Fee	Total Paid
Counselor					
Counselor/CIT (if desired)					
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
<b>TOTAL</b>			#	#	\$