

Winter Camp Registration, 2017

Cost is \$60 per person and includes lodging, 4 meals and the program.

Name of Church: _____

Contact Name: _____

Address: _____

Email: _____ Phone: _____

I am Registering For:

Confirmation/ Jr. High
January 12-14

High School
February 9-11

Family Camp
March 3-4

Please fill in the name, gender and age of everyone you are registering. Please note each group must bring one adult chaperone for every 7 youth registered. It is recommended that you bring at least one female and one male chaperone if bringing a mix of female and male youth.

Full Name	Age	Gender

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Total Cost is \$60 per person registered. A deposit of \$25 per person is due at time of registration.

Deposits are due three weeks prior to the retreat.



Luther Point Bible Camp, 11525 Luther Point Rd. Grantsburg, WI 54840

www.lutherpoint.org info@lutherpoint.org



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Total Number of People Registered: _____ X \$60 = _____ (Total Due)

Total Number of People Registered: _____ X \$25 = _____ (Deposit Amount)

Enclosed is my payment of: \$ _____

Deposit

Total Paid in Full

Payment Method

Check

Check Number: _____ Amount: \$ _____

Credit Card

Card Type: Visa Mastercard Discover American Express

Name on Card: _____

Billing Address: _____

Card Number: _____ CCV: _____

Amount: \$ _____

Credit Cards can also be taken over the phone by calling Luther Point's main office at: 715-689-2347

I understand all deposits are non-refundable. There is no Luther Point Bible Camp health form needed for Winter Retreats. Each congregation is responsible for obtaining current health information for each participant attending camp. If you are attending a retreat on your own please fill out the health form and email it to Info@lutherpoint.org two weeks prior to retreat date. All known allergies or major health concerns need to be reported to the Camp Directors.

Signature of Church Representative

Date



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