

Parent Name (s) \_\_\_\_\_

Address \_\_\_\_\_  
STREET CITY ST ZIP

Phone Numbers: Home \_\_\_\_\_ Cell \_\_\_\_\_

E-mail \_\_\_\_\_ Home Church \_\_\_\_\_  
[FOR CONFIRMATION PURPOSES] City \_\_\_\_\_

**REGISTRANTS**

LIST ALL REGISTRANTS AS YOU WISH THE NAME TO APPEAR ON NAME TAG, EVEN IF NAMES APPEAR ABOVE.

Name [FIRST, LAST]	Birth Date [MM/DD/YYYY]	Gender M / F	Grade [NEXT YEAR]
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**RETREAT PREFERENCE**

WRITE THE RETREAT CODE BELOW IN ORDER OF PREFERENCE

_____	1 <sup>ST</sup>	CHOICE
_____	2 <sup>ND</sup>	CHOICE
_____	3 <sup>RD</sup>	CHOICE
_____	4 <sup>TH</sup>	CHOICE

- This is a group reservation. Name of contact person is \_\_\_\_\_
- Wish to celebrate birthday/anniversary of \_\_\_\_\_ on \_\_\_\_\_ [MM/DD]
- Wish to dine with or near \_\_\_\_\_
- This is my/our first time at Camp Arcadia
- Does anyone in your family have dietary restrictions or food allergies \_\_\_\_\_

- Women's and Arcadia Men's retreat Thursday night add on

Photo/Media Release: By registering, I grant Camp Arcadia and its agents the right to use, reproduce, assign and/ or distribute photographs, films, video tapes and sound recordings of me, for use in materials they may create for the sole purpose of promoting Camp Arcadia

**HOUSING AND OTHER PREFERENCES**

Please rank any of the following that are acceptable using 1<sup>ST</sup>, 2<sup>ND</sup>, 3<sup>RD</sup>, etc

- Traditional Inn room
- Inn room with private bath, 2nd floor (Surcharge Applies)
- Inn room with universally accessible private bath, 1st floor (Surcharge Applies)
- Camp-owned cottage (Surcharge Applies)
- ASPEN  CEDAR  SPRUCE  BIRCH  JUNIPER
- Need 1<sup>st</sup> floor traditional inn room for health reasons
- Single person in room (Surcharge Applies)
- Dorm in assembly building
- No housing needed [Commuter Rate Applies]

I'm staying at: \_\_\_\_\_

If you are registering for family or Labor Day retreats:

- Teens 15 yrs. and older are to share room with parents
- Need an 18-month pac-n-play
- Need a dining room booster chair
- Need a dining room high chair

If you are registering for a teen, men's or women's retreat then:

Roommate choice 1. \_\_\_\_\_  
2. \_\_\_\_\_

- I am NOT willing to take a top bunk
- For teen week registrants, adult t-shirt size:  
S M L XL XXL \_\_\_\_\_

**DEPOSIT**

A. Total number of paying guests \_\_\_\_\_ B. Minimum deposit per person \$ \_\_\_\_\_  
C. Total deposit enclosed \$ \_\_\_\_\_ [ A x B ]

Payment method:  Check [ payable to Camp Arcadia ]  Discover, VISA or MasterCard CVV \_\_\_\_\_

Card number: \_\_\_\_\_ Exp. [MM/DD] \_\_\_\_\_ Signature \_\_\_\_\_