



JULY 23-25, 2012

Registration Form

Student's name: _____

___ Basketball ___ Golf ___ Lacrosse ___ CSI Science

Grade entering: _____ male ___ female ___

Parent's name(s): _____

Address: _____

Phone: _____ E-mail: _____

Emergency Phone(s): _____

Allergies: _____

Medications: _____

of people attending the closing event: _____

(cost for the camper and 2 family members is included in the camp fee)

I, _____ give my permission to the leaders of the "Focus Camp" to secure emergency medical care for _____ in the event I cannot be reached.

Signature of parent or guardian: _____

Date: _____

Payment form: check enclosed ___ credit card ___ online ___

Credit card # _____ exp. date: ___/___

Amount: _____

Signature: _____

To pay online go to www.prairieoakchurch.net and click on the "giving" link (use the "other donation" field and specify Focus Camp and student's name). You can pay via EFT or credit card. *Cost: \$100.00 prior to July 1st, \$125.00 after July 1st*

Please mail this registration along with your payment to:

Prairie Oak Community Church, 1657 161st Avenue NW, Andover MN 55304 - 763-434-8191

FAX: 763-434-3411 - email: rskor@prairieoakchurch.net