

**YOUTH IMPACT WEEK 2008**  
**REGISTRATION FORM**

\_\_\_\_\_ **WEEK #1**  
**JULY 7-11**

\_\_\_\_\_ **WEEK #2**  
**JULY 14-18**

\_\_\_\_\_ **WEEK #3**  
**JULY 21-25**

Registrations postmarked by May 30 are **\$120.00** per person. Registrations postmarked after May 30 are **\$130.00** per person. Rate for churches not affiliated with State Convention of Baptists in Ohio is **\$205.00 per person**. Please complete and return this form along with a registration fee of **\$30.00** per person. The balance due upon arrival at camp is the cost of camp minus the registration fee. You will need to send chaperones as indicated (suggested age of 21 and over):

**1-7 campers - 1 chaperone; 8-14 campers - 2 chaperones; 15-21 campers - 3 chaperones, etc.**

**If you have both male and female campers, you must send both male and female chaperones.**

It is suggested that the church pay the total cost of the chaperones. Please make check payable to:

**STATE CONVENTION OF BAPTISTS IN OHIO OR S. C. B. O.**

Cancellation Policy: In the event that a confirmed reservation must be cancelled, the cancellation must be postmarked or called in to the Evangelism Resource Group no less than 7 days before the date on which the reservation begins in order to receive a FULL refund of the deposit. Those canceling less than 7 days prior to the camp will forfeit their deposit. For groups in which there are no-shows, the deposit WILL NOT be refunded or allowed to apply toward charges for other groups.

**\* HANDICAP ACCESSIBLE ROOM MUST BE RESERVED ONE MONTH PRIOR TO CAMP \***

**CHURCH** \_\_\_\_\_ **PASTOR** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_ **CITY** \_\_\_\_\_

**STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **ASSOCIATION** \_\_\_\_\_

**CONTACT PERSON** \_\_\_\_\_ **CHURCH PHONE** (\_\_\_\_\_) \_\_\_\_\_

Youth: _____ Males	Total Amount Due: \$ _____
_____ Females	Registration Fee Paid: \$ _____
Adults: _____ Males	Remaining Balance \$ _____
_____ Females	<b>*Please bring this amount with you to registration at camp along with a copy of your final registration list.</b>
Total Registered: _____	

**Please send Registration form and Acknowledgment and Assurance Form to**  
**STATE CONVENTION OF BAPTISTS IN OHIO OR S. C. B. O.**  
**1680 East Broad St. Columbus, OH 43203**  
**Attn: Youth Evangelism**