

KID'S KAMP 2017 REGISTRATION FORM

Please check the appropriate box:

<input type="checkbox"/> Kids Kamp 1 <i>June 19-23, 2017</i> REGISTRATION DEADLINE: May 19 Late Registration May 20-June 3	<input type="checkbox"/> Kids Kamp 2 <i>June 26-30, 2017</i> REGISTRATION DEADLINE: May 19 Late Registration May 20-June 3	<input type="checkbox"/> Kids Kamp 3 <i>July 24-28, 2017</i> REGISTRATION DEADLINE: July 1 Late Registration July 2-10
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Total cost of **Kids Kamp** is **\$150.00 per person (\$30 Deposit)** [Late registrations will be charged \$160 (\$40 Deposit)]. Please complete and return this form, the deposit per person (non-refundable after each camps registration deadline), and a completed Acknowledgment and Assurance Form. Forms and payment not postmarked by the Registration Deadline will be processed at the late rate. The remaining balance is due upon arrival at camp.

Deposit may be paid by credit card or checking account online at scbo.org/register.

This camp is designed for children who have completed grades 3–6. Please do not send younger or older children. NON-SBC affiliated groups are not supported by the Cooperative Program and will be charged an additional \$64.00 per person.

One chaperone of the same gender is REQUIRED for every group of 1 to 7 campers. Chaperones must be 18 years or older. If you bring a chaperone-in-training (must be a minimum of 14 years of age) he/she must be listed below as one of the campers not as a chaperone and complete the Junior Chaperone Parent and Pastor Recommendation Form.

T-shirts will be available for \$5

Questions: Tim Binns (614) 601-6846 or tbinns@scbo.org

Church Name _____ Phone _____

Street Address _____

City/State/Zip _____

Pastor's Name _____ Association _____

Contact Person _____ Phone _____ Email _____

Students: _____ Males _____ Females	Total Amount Due: \$ _____ Registration Fee Paid: \$ _____
Adults: _____ Males _____ Females	Remaining Balance \$ _____ ** **If there are no changes, Please bring this amount with you to on-site registration at camp along with the final attendance sheet and medical forms for each person
Total Number Registered _____	

Please mail completed forms and payment to:

Kids Kamp
 State Convention of Baptists in Ohio
 9000 Antares Ave.
 Columbus, OH 43240