

**YOUTH CAMPS 2017**  
**REGISTRATION FORM**

\_\_\_\_\_ **WEEK #1**  
**JULY 3-7**

\_\_\_\_\_ **WEEK #2**  
**JULY 10-14**

\_\_\_\_\_ **WEEK #3**  
**JULY 17-21**

**Per person cost for registrations postmarked by May 21 is \$155.00. Per person price for registrations postmarked after May 25 is \$165.00. Rate for churches not affiliated with State Convention of Baptists in Ohio is \$225.00 per person.** Please complete and return this form along with a deposit of **\$40.00** per person before May 19. **After May 19**, the deposit is **\$50**. The balance due upon arrival at camp is the cost of camp minus the deposit.

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 checks\* 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 21 days before the date on which the reservation begins in order to receive a FULL refund of the deposit. Those canceling less than 21 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 individuals in the group.

**\*Deposits and balances due may be paid by credit card (see on line registration.)**

~ **HANDICAP ACCESSIBLE ROOM MUST BE RESERVED TWO MONTHS PRIOR TO CAMP** ~

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

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

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

**YOUTH LEADER** \_\_\_\_\_ **CELL PHONE (\_\_\_\_\_)** \_\_\_\_\_

**EMAIL ADDRESS** \_\_\_\_\_

<b>Youth:</b>	_____ Males	Total Amount Due: \$ _____
	_____ Females	Registration Fee Paid: \$ _____
<b>Adults:</b>	_____ Males	Remaining Balance \$ _____ **
	_____ Females	<b>**If there are no changes, Please bring this amount with you to on-site registration at camp along with a copy of your final registration list.</b>
<b>Total Registered:</b>	_____	

**Please send Registration form to**

**Attention: Youth Evangelism**  
**STATE CONVENTION OF BAPTISTS IN OHIO OR S. C. B. O.**  
**9000 Antares Ave.**  
**Columbus, OH 43240**