

## JUNIOR ON CAMPUS REGISTRATION

NAME	JULY 5-7, 2022
GENDER M F	TOTAL DUE \$160
AGE DURING CAMP BIRTHDAY/	PAYMENT TYPE  (CASH   CHECK   )
ADDRESS	n Se
CITY STATE ZIP KNOWN MEDICAL CONDITION(S) WE SHOULD BE AWARE OF:	OFFICE L
EMERGENCY CONTACTS	
#1 PARENT/GUARDIAN	()
#2 PARENT/GUARDIAN	()
#2 OTHER	()
relationship	
CHURCH AFFILIATION	
PASTOR CHURCH NAM	E
1. HAVE YOU RECEIVED THE GIFT OF THE HOLY GHOST? Y N  2. HAVE YOU BEEN BAPTIZED IN JESUS' NAME? Y N	
Please circle your T-shirt size below so we can try to have one available for you.  T-shirts are guaranteed for those who registered early online.  YOUTH XS S M L XL) (ADULT XS S M L XL 2XL 3XL 4XL)	