

REMOVE THIS PAGE FOR ...

FAMILY, PARENT/CHILD & ADULT FELLOWSHIP

2017 REGISTRATION

Mail with deposit fee to: Camp YoliJwa, 1550 Doubling Gap Road, Newville, PA 17241.

PLEASE PRINT CLEARLY ... SORRY, NO PHONE, FAX OR EMAIL REGISTRATIONS.

This registration is for: Family Bible Camp Father/Son Mother/Daughter Adult Fellowship
Are you a first-time Summer YoliJwa Camper? Yes No

Name _____

Address _____

Home Phone _____ Email Address _____

Church You Attend (Name & Town) _____ None

Family & Adult Fellowship Only:

I/We will: Commute daily Stay at camp in an RV Stay at camp in a room
 Full-time Part-time If part-time: First day & meal _____ Final Day & Meal _____

I/We desire to stay in a wilderness cabin. Cabin cost is \$40/night additional, which can be shared with roommate(s). If available Only choice

I/We desire to stay in a motel room. Each room has a private bath and 3 beds (1 double bed, 1 sofa bed, 1 top bunk). Room cost is \$25/night additional, which can be shared with roommate(s).

If available Only choice

Optional roommate request (any camp): _____

Please list ALL campers below. **Family & Parent/Child Campers:** List children's grade entering in fall.

NAME _____ DATE OF BIRTH _____ GRADE ENTERING _____

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NAME _____ DATE OF BIRTH _____ GRADE ENTERING _____

FULL-TIME/PERSON	ADULTS	5-17 YRS	UNDER 5
Family-Dorm Lodging	\$212	\$106	\$32
Family-RV Lodging	\$192	\$96	\$26
Senior-Dorm Lodging	\$150	-	-
Senior-RV Lodging	\$140	-	-
Parent/Child	\$45	\$45	-
PART-TIME/PERSON	ADULTS	5-17 YRS	UNDER 5
Breakfast Meals	\$7	\$4	\$2
Lunch Meals	\$8	\$5	\$2
Dinner Meals	\$9	\$6	\$2
Day Fee (if no lodging)	\$6	\$4	\$2
Dorm Lodging/Night	\$16	\$8	\$2
RV Lodging/Night	\$12	\$6	\$2

Church of God Sponsors

ATTENTION CHURCH OFFICIAL

Fill in amount church is paying AND sign!

The _____ COG

is paying \$ _____

Authorized Signature _____

Church amount enclosed \$ _____

Church amount to be billed \$ _____

A \$30 nonrefundable application fee must accompany each family registration and will be applied towards camp rate. Checks payable to Camp YoliJwa ... **NOTE:** A maximum of \$848 will be charged per household.

For office use only: Date Rec'd _____ Deposit: _____ Credits: _____ Amount Due: _____