

THE CAMP FACILITY

1. Fantastic camp located on beautiful Lake Keesus with activities that include canoeing, swimming, basketball, soccer, and volleyball.
2. The camp includes cabins with fireplaces, good bath facilities, and great food.
3. Spirit-filled worship led by enthusiastic song leaders and inspirational speakers.
4. Meaningful devotions led by devoted youth leaders.
5. A place where new Christian friends are made.
6. Memories that last a lifetime.

Camp Calvin is a ministry to youth directed by a board that serves under the auspices of Classis Wisconsin of the Christian Reformed Church. Camp Calvin staff is composed of members of several CRC and OPC congregations.

INSTRUCTIONS

1. Complete the form below the dotted line, clip, and mail with a \$50.00 registration fee payable to Camp Calvin. **Balance due May 20.**

Send to: Steve Potter
8626 W. Stuth Avenue
West Allis, WI 53227

**Please
do not
send cash.**

Give completed health form to your church's contact person no later than May 20.

2. Total camp fee is \$300.00 (includes a T-shirt). After **May 1**, a late fee of **\$10.00** will be charged per registration. Full refunds will be made for any reason up until May 20th. After May 20th and until the date of camp, full refunds will only be made for medical or other emergency reasons (death in the family, etc.)
3. Registrations received after May 20 must include a completed health form and full payment.

TO BRING:

Canteen Money - \$15.00 max. *
Plus Special Offering (at registration)
for Bethany Christian Services
Bible/Pen/Notebook
Sleeping Bag
Pillow
Toothbrush/Soap/Towels
Bathing Suit (Girls – one-piece)
Please wear swimsuit on arrival
Proper footwear
Rain Jacket
Flashlight
Athletic Equipment
Insect Repellent
Cheerful Smile
Cooperative Attitude
Desire to Live for God

Mark or label every item with your child's name.

DO NOT BRING:

Over-the-counter medications
(Camp provides Tylenol, Advil, decongestants, anti-histamines, etc.)
Electronic Devices
Cell Phones
Pocket Knives
Water Transmitting Devices
(balloons, squirt guns)

If any of these items are brought to camp, they will be checked in on arrival and returned at the close of camp. Thank you!

* Left-over monies will be added to offering. No refunds.

Parents are discouraged from visiting while camp is in session.

State law requires that camper and staff medications be distributed by the Camp Nurse. All medications must be in labeled prescription bottles, exactly as they are to be administered. Please ask your physician for an updated prescription to take to camp, if needed.

CAMP CALVIN 2010 REGISTRATION (one form per child, to be completed by parent) *Print Clearly*

Name _____ Sex: M / F

Health Insurance: Yes No

Address _____

Policy in name of: _____

City _____ State _____ Zip _____

Insurance Company _____

Home Phone _____ Age _____

Insurance Policy Number _____

Church _____

Grade entering in Fall, 2010 _____

Parent e-mail: _____

Camper's e-mail: _____

Roomate Preference: 1. _____

Maximum: Two 2. _____

T-shirt: Youth: XS, S, M, L, XL Adult: S, M, L, XL (Circle one)

FOR OFFICE USE ONLY

Date Received _____

Balance Due _____

Date Health form & balance rec'd: _____

Cabin _____

Checked in: