

# Confirmation Camp Registration Form



## Camper Information:

Name \_\_\_\_\_ Gender \_\_\_\_\_

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Email Contact \_\_\_\_\_ Mobile Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Location (Danville or Camp Carew) \_\_\_\_\_

Any special dietary needs \_\_\_\_\_

## Parent Information:

Mother's Name \_\_\_\_\_ Mobile/Work phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Mobile/work phone \_\_\_\_\_

## Church Information:

Church Name \_\_\_\_\_

Pastor's Name \_\_\_\_\_

**Mail form to:** Camp Carew Registrar  
303 Hidden Bay Lane  
Makanda, IL 62958