

Copy this form for a friend!

# Registration Form

## Oregon-Idaho United Methodist Camp & Retreat Ministries

- ◆ All registration must be received at least **two weeks prior** to the start of event.
- ◆ A \$50 deposit is required unless another amount is indicated in the description.
- ◆ Deposit is non-refundable.
- ◆ You may fax this form. Include credit card number and expiration date.
- ◆ A **\$25 Late Fee** will be added for all summer camp registrations rec'd after **May 5<sup>th</sup>**.

Name: \_\_\_\_\_  Male  Female

Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

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

Local Church \_\_\_\_\_ City \_\_\_\_\_

For youth: Birthdate \_\_\_\_\_ Completed grade at time of camp \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Emergency/Work phone (\_\_\_\_) \_\_\_\_\_

If desired, give the name of one person only with whom a camper wishes to share a cabin.

This must be a mutual request. \_\_\_\_\_

Note to Parents: In order to facilitate carpools, we may release parent's name to other registered campers. We do not sell or distribute address lists to outside persons, however if you do not wish your address shared with other campers contact registrar by email: [camping@umoi.org](mailto:camping@umoi.org) or call 1-800-593-7539

Event Name \_\_\_\_\_

Latgawa  Magruder  Sawtooth  Suttle Lake  Wallowa Lake  Other

Arrival Date \_\_\_\_\_ Departure Date \_\_\_\_\_

For Sawtooth Bus:  Fairfield  Jerome

For Wallowa Lake Retreat Lodging Choices:

Deluxe  Rustic  Commuter  Other \_\_\_\_\_

Extra requests (linens etc.) \_\_\_\_\_

### General information:

Make checks payable to: **Conference Treasurer**

Send Registration to: **Camp Registrar**  
**1505 SW 18<sup>th</sup> Avenue**  
**Portland, OR 97201**

For more information contact Geneva Cook in the camping office:

Inside Portland area: **(503) 226-7931** Toll-free: **1-800-593-7539**

Fax number: **(503) 226-4158** e-mail: [camping@umoi.org](mailto:camping@umoi.org)

### For Family Camp Events

Please put name, gender, birthdate or age (for children & youth) and address (if different from above) for all additional family members or others attending family events together who wish to share facilities.

Name	Birthdate (A=Adult)	Gender	Fee*
1. Camper Named above	_____	M F	\$ _____
2. _____	_____	M F	\$ _____
3. _____	_____	M F	\$ _____
4. _____	_____	M F	\$ _____
5. _____	_____	M F	\$ _____
6. _____	_____	M F	\$ _____

**Total Family camp fees \$ \_\_\_\_\_**

\* Add \$10 per person late fee for family camp registrations sent after May 5<sup>th</sup>.

### Office Use Only

Date Rec'd \_\_\_\_\_

Date Input \_\_\_\_\_

Dep Amt \_\_\_\_\_

Letter Sent \_\_\_\_\_

Packet Sent \_\_\_\_\_

### Payment

Cost of Event \$ \_\_\_\_\_\*

(Use bottom box for family events)

Add Late fee after May 5<sup>th</sup> \$ \_\_\_\_\_

Option Fees  
(Options for selected camps/events.  
Check catalog descriptions.)

Bus Fee \$ \_\_\_\_\_

Raft Trip \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Other \_\_\_\_\_ \$ \_\_\_\_\_

Optional Gift to Campership Fund \$ \_\_\_\_\_

Amount Enclosed \$ \_\_\_\_\_

(\$50 non-refundable deposit unless otherwise indicated.)

Balance Due \$ \_\_\_\_\_

(Two weeks before event starts)

**Check out our website at [www.gocamping.org](http://www.gocamping.org)**

To pay by Credit Card:

(Visa, Mastercard, Discover or American Express)



Card Number \_\_\_\_\_

Expiration date \_\_\_\_\_

\$ \_\_\_\_\_  
Amount to be charged

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_