

SUSQUEHANNA CONFERENCE CAMP & RETREAT MINISTRY 2023 CAMP REGISTRATION FORM

It's easy to register online at
susumcamps.org

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FAMILY INFO

Name of Camper: _____

Camper Address: (Street, City, State, Zip) _____

Best E-mail: (to receive pre-camp information) _____

Parent 1/ Guardian Name: _____ Parent 2/ Guardian Name: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Cell Number: _____ Cell Number: _____

Address: (If different from camper) _____ Address: (If different from camper) _____

Name of Church: _____ City: _____ Denomination: _____

Sponsoring church/agency responsible for payment: _____ Amount (if known): \$ _____

CAMPER INFO

Date of Birth: _____ Male Female Age at Camp: _____ Grade COMPLETED Spring 2023: _____

Cabinmate Request: (full name) _____
(If possible we will honor your request for one cabinmate. Campers must be in the same age group/event and list each other on their registration forms.)

Camper Resides with: Mother Father Both Other _____

Is this the first time attending a Susquehanna Conference UM Camp: Yes No

I first heard about camp through: Church Brochure Website Family Friend Newsletter Other _____

CHOICES

please list your top

2

Dates: (ex: July 16- 21) _____ Event Name: (ex: Messtival) _____ Center: (Camp Penn, Greene Hills, Mt. Asbury, Wesley Forest) _____

1. _____

2. _____

Total Program Fee(s): \$ _____

DISCOUNTS

___ \$25 Early Bird Discount (Registrations must be postmarked **on or before May 1**)

___ \$15 Sibling Discount (First child in family registers at full price)

My sibling is _____

___ Invite a friend that **has never been** to a **Susquehanna Conference UM Camp before**

My first time camper friend is _____

A 50% deposit of the listed camp fee will be due by May 1.

Balance due 2 weeks before camp begins.

Total Discounts: - \$ _____

Total: \$ _____

Amount Enclosed: \$ _____

Balance Due: \$ _____

Check Camper's T-Shirt Size Youth: small medium large Adult: small medium large X-Large XX-Large XXX-Large

SIGN

PLEASE READ CAREFULLY AND CHECK CIRCLES THAT APPLY

- I give permission for my child to attend the camp session for which he/she is registering.
- I give permission for my child's name, address, phone number, and e-mail address to be shared with his/her fellow campers.
- I give permission for still or video pictures of my child to be taken and used for camp promotional purposes.
- I give permission for photos of my child to be placed on Susquehanna Conference websites and Social Media pages in a camping context.

Parent/Guardian Signature _____ Date _____

Parent/Guardian Name (please print) _____

PAYMENT

*** We are waiving the 50% DEPOSIT until May 1.** After that, we require the deposit to secure your place at camp. Please make checks payable to *Susquehanna Conference* or fill out the credit card information below.

CREDIT CARD INFORMATION

VISA MASTERCARD DISCOVER

Name of Cardholder as it appears on card: _____

Zip Code of Cardholder's Billing Address: _____

Card Number: _____

Card Expiration Date: _____

3-digit Verification Code from back of card: _____

Amount to be charged: * _____

Cardholder Signature: _____

Date: _____

FOR OFFICE USE ONLY

Date Received: _____ Date Processed: _____ Fee \$: _____

Family Check #: _____ Church Check #: _____ Other Check #: _____

Amount \$: _____ Amount \$: _____ Amount \$: _____

Camp #: _____ Campership: _____ Confirmed: _____

Send **completed & signed registration form, medical form (both sides) and deposit to:**
SUSUMC Camping Office, 303 Mulberry Drive, Mechanicsburg, PA 17050-3179 • camps@susumc.org • fax: 717-766-5976

*Paper registration and medical forms can also be found on and printed from the website.
Paper registrations will be processed in the order in which they are received.*

Susquehanna Conference UMC
Camp & Retreat Ministry
303 Mulberry Drive
Mechanicsburg, PA 17050-3179
e-mail: camps@susumc.org
fax: 717-766-5976

- Have you completed all sections on the registration form?*
- Have you signed and checked off the permission circles on the registration form?*
- Did you provide a valid email address to receive pre-camp information?*
- Is the medical consent form filled out completely, including emergency contact person?*

NOTE: *Balance due 2 weeks before camp begins.*