

# SUSQUEHANNA CONFERENCE CAMP & RETREAT MINISTRY 2024 CAMP REGISTRATION FORM

It's easy to register online at  
[susumcamps.org](http://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 2024: \_\_\_\_\_

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 14- 19) \_\_\_\_\_ 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](mailto: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](mailto: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.*