



Print this page and fill in the appropriate information

MEMORIAL DAY FAMILY CAMP – REGISTRATION FORM May 23-26, 2008

Name: _____ Phone: (____) _____
(First) (Last)

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

Children:

(Name) (Birth Date/Sex) (Name) (Birth Date/Sex)

(Name) (Birth Date/Sex) (Name) (Birth Date/Sex)

(Name) (Birth Date/Sex) (Name) (Birth Date/Sex)

ACCOMMODATIONS: Please indicate 1st, 2nd, & 3rd choice (*first come, first served*)

- Willow Inn/Whispering Pines/Brookside (*private bath, linens provided*).....\$ 220.00 / adult
- Eshom Creek Hotel/Twin Firs (*shared bath, linens provided*)\$ 187.00 "
- Eagles Perch (*private bath, bring your own linens, towels, etc.*)\$ 187.00 "
- Cabins Plus (*1/2 bath, central bathhouse, bring your own linens, towels, etc.*)\$ 176.00 "
- Cabins (*central bathhouse, bring your own linens, towels, etc.*)\$ 143.00 "
- RV site (*with water, electric & sewer*)\$ 143.00 "
- RV/Tent site (*without water, electric & sewer*) or your own private cabin \$ 121.00 "

Children: age 12 and over = adult rate ages 3-11 = 1/2 adult rate age 2 and under = no charge

Hartland Christian Camp reserves the right to include pictures, videos, or other likenesses of you or your family members for promotional purposes.

A non-refundable deposit of \$ 40.00 per family will hold your reservation – thank you!

Method of Payment:

- Check** - Make checks payable to Hartland Christian Camp
- Credit Card** - Use form below or call 559-337-2349 or toll free 888-202-4024

VISA / MASTERCARD / DISCOVER

(circle one)

NAME: _____ DATE: _____
(as it appears on card)

ACCOUNT # _/ _/ _/ _/ - _/ _/ _/ _/ - _/ _/ _/ _/ - _/ _/ _/ _/

EXP. DATE ___ / ___ AMOUNT \$ _____

AUTHORIZED BY _____

HARTLAND OFFICE:

DATE ENTERED ___/___/___ BY: _____ AUTH # _____

Mail or fax individual registrations to:
Hartland Christian Camp,
57611 Eshom Valley Drive, Badger, CA 93603
Fax: 559-337-2251