

GROUP / INDIVIDUAL REGISTRATION



Ministry Name: _____ Fax: _____

Address: _____

Contact Person: _____ # of Participants: _____

E-mail: _____ Phone: _____

Dates of Interest 20__ : 1st Choice: _____

2nd Choice: _____

WEEK LONG AND WEEKEND RETREATS

A. 3 Day/ 2 Nights: **B.** 4 Day/ 3 Nights: **C.** 5 Day/ 4 Nights:

- | | | |
|--|---|--|
| <input type="checkbox"/> Friday-Sunday | <input type="checkbox"/> Friday-Monday | <input type="checkbox"/> Monday-Friday |
| <input type="checkbox"/> Wed.-Friday | <input type="checkbox"/> Monday-Thur. | (4 Activities below) |
| <input type="checkbox"/> Monday-Wed. | <input type="checkbox"/> Tuesday-Friday | |
| (2 Activities below) | (3 Activities below) | |

PLEASE CALL WITH ADDITIONAL SCHEDULING QUESTIONS

SUMMER CAMP

—JUNE AND JULY—

\$270 per participant
(2009)

SIGN OUR GROUP UP! *

Cost Includes:
 -Mon. Arrival thru Sat. A.M. Departure
 -Lodging
 -Meals
 -Activities (Tower, Caving, Waterfall, Ropes Course, Buck Bald, Work Projects, Volleyball, etc.)
 -Evening Services
 -Staff

If you are NOT registering for summer camp please fill out this box in its entirety.

Activities:

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Tower | <input type="checkbox"/> Caving |
| <input type="checkbox"/> Low-Ropes | <input type="checkbox"/> Waterfall |
| <input type="checkbox"/> Mission/Work Projects | |
| <input type="checkbox"/> Buck Bald | |

I would like CLS to provide:

- Evening Messages
 Music
 or
 WE will provide

Below choices are optional and pricing shown is per person.

- Whitewater Rafting (March—October)
Rates vary.
 T-Shirt (\$10)

Additional Comments/Questions:

*Prices are subject to change. Group dates are NOT reserved until a deposit is received. Call ahead to schedule deposit:

**Camp Living Stones * 534 County Road 876 * Englewood, TN 37329
 (423) 263-5060 * livingst@earthlink.net * www.camplivingstones.com**