

Family Retreat

Application Form

Please list the following information for all attending. Price is \$60 per adult, \$45 for under 18, free for 5yo and under. A t-shirt will be provided to all paying registrants who register before May 15th.

ADULT #1 (PRIMARY CONTACT)

Name _____ Phone _____

Address _____

Church Name and City _____ Shirt size **S M L XL 2XL 3XL 4XL**

Email address _____

Please list the names, ages, and shirt size of any additional adults or children:

Name	Age	YS	YM	YL	S	M	L	XL	2XL	3XL	4XL
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

Please note that camper photos are sometimes used in promotional materials. If you do **NOT** give permission for photos of you or your family to be used by the management of Craig Springs, please sign below.

Signature (OPTIONAL) _____

Although as a general practice Craig Springs Camp has a nurse on site, it is not guaranteed during this retreat. **You are responsible for the medical care of yourself and your family.** *Craig Springs does not carry primary care insurance and will not be held responsible for accidents or injuries or any medically related issues while on camp property.*

Please sign here to acknowledge (REQUIRED) _____