

Summer Camp sign up



June 6-11

How to register:

- ⇒ complete this envelope
- ⇒ complete Trinity Pines medical form
- ⇒ Complete STBC medical form (if needed)
- ⇒ seal money & forms inside
- ⇒ **full balance due May 29**
- ⇒ give envelope to Judy Isbell or Jason Goza

Name: _____ **Phone:** (____) _____

I am enclosing: \$ _____ **I am requesting a scholarship in the amount of \$** _____

Registration Information

Address: _____ City: _____ Zip: _____

Email Address _____ Birthdate ____/____/____

What School do you attend? _____ Grade completed _____ Age _____

Adult T-Shirt Size: Sm ____ Med ____ Lg ____ XL ____ XXL ____

Emergency Contact _____ their relationship to you: _____

Daytime or Cell Phone: (____) _____ Home Phone: (____) _____

Are you a member of Shiloh Terrace Baptist Church? Yes ____ No ____

If you are not a member, do you normally attend church somewhere else?

____ No ____ Yes, I normally attend: _____

If visiting, who invited you to attend? _____