

## FAMILY CAMP REGISTRATION

PLEASE PRINT CLEARLY OR REGISTER AT WWW.LOSD.ORG

Your Name: \_\_\_\_\_

Male  Female Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_

Camp Info Sent Here E-mail: \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Primary Phone ( ) \_\_\_\_\_ Cell Phone ( ) \_\_\_\_\_

Congregation/Organization & Town \_\_\_\_\_

Allergies/Special Requests: \_\_\_\_\_

**Family Member Names:** \_\_\_\_\_ **Date of Birth /** \_\_\_\_\_ **Gender / Age / Grade** \_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

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\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

Returning Campers  First Time Campers

Site: \_\_\_\_\_

Program Name: \_\_\_\_\_

Dates Attending: \_\_\_\_\_

Housing Preference:

Lodge  Cabin  Campground

### Non-Refundable Deposit of \$125:

Required for completed registration.

Check  Credit/Debt Card

Payment in Full required 2 weeks prior to camp.

Please charge this amount \$ \_\_\_\_\_ to my Account # \_\_\_\_\_

Billing Address (If different than to the left)

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

### How did you hear about this program?

\_\_\_ Web \_\_\_ Mailing \_\_\_ Friend/Relative

\_\_\_ Retreat \_\_\_ School \_\_\_ Church Group

\_\_\_ Other \_\_\_\_\_

**Return to:** Lutherans Outdoors in SD • 2001 S Summit Ave • Sioux Falls SD 57197 • 800-888-1464

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**WE NEED YOUR HELP!** Please help us gather statistical information (often requested in grant applications, by our national camping office, etc.) This is optional. (Please note number of people in each category if you are completing for a family or group.)

**Camp:**  NeSoDak  Klein Ranch  Joy Ranch  Outlaw Ranch      **Program:**  Summer Camp  Retreat  Other

**Gender:** \_\_\_ Female \_\_\_ Male    **Disability:** \_\_\_ Yes \_\_\_ No    *Brief description* \_\_\_\_\_

**Age Category:** \_\_\_ Under 10 \_\_\_ 11-18 \_\_\_ 19-30 \_\_\_ 31-40 \_\_\_ 41-50 \_\_\_ 51-60 \_\_\_ 61-70 \_\_\_ Over 70

**Racial/Ethnic Group:** \_\_\_ Multi-ethnic \_\_\_ Black / African American \_\_\_ White \_\_\_ American Indian / Alaska Native \_\_\_ Asian / Pacific Islander  
\_\_\_ Hispanic / Latino \_\_\_ Arab / Middle Easterner

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