

SpringHill! Camps

JUNIORS RETREATS REGISTRATION FORM 2010

MARK YOUR CALENDAR

2010

October 1-3

SPEAKER

SpringHill

BAND

Carey Edgren



COST

\$110/person

Deposit enclosed: total # of people _____ x \$50.00 = _____
 Reserved space for # of teens _____ # of leaders _____
 (Your confirmation letter will provide the deadline for your gender break down.)

Check or money order enclosed for \$ _____

Electronic transfer from checking account:

Bank _____

Bank routing number _____

Bank account number _____

Credit card (circle one) Visa Mastercard Discover

Signature _____

Name on card _____

Account number _____ - _____ - _____ - _____

Expiration date ____ / ____

REGISTER

To register, mail or fax a completed form along with a \$50.00 registration fee for each person. Faxed registrations must include credit card or EFT information. You are responsible for full payment for the number of spaces you reserve. Full payment is required two weeks prior to the event. Registrations are processed in the order they are received. All correspondence will be emailed to the contact person.

Name of group _____

Address _____

City _____

State _____ Zip _____

Contact person _____

Phone _____

Cell _____

Email _____



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 Email: registerIN@springhillcamps.com
 springhillcamps.com