

2012 REGISTRATION

THIS YEAR REGISTER ONLINE AT RainbowTrail.ORG

Please Check One:

- Intro to Camp
- Junior Camp
- Junior High Camp
- Confirmation Camp
- Senior High Camp
- Compass Points
 - Jr Hi
 - Sr Hi
- Family Camp
- Labor Day Weekend
 - Lodge
 - Cabin

Ist Choice _____
 2nd Chioce _____

FAMILY CAMP/LABOR DAY

Names and ages of children:

_____	_____
_____	_____
_____	_____
_____	_____

Total Family Members: _____

- Health Form and Instructions will be mailed after April 15,2012
- REFUNDS CANNOT BE MADE AFTER JUNE 1,2012
- Make checks payable to: **Rainbow Trail Lutheran Camp**
- Mail to: Registrar, Rainbow Trail Lutheran Camp, 107 S. Ninth Street, Ste. B, Canon City, CO 81212

Check here if family discount requested. Attach names of all children.

OFFICE USE ONLY

Cabin_____

Counselor_____

B H O W

Camper's Name _____ Age _____ Sex _____ Grade in Fall '12 _____ Birthdate ____/____/____

Parent's/Guardian's Name _____ Address _____

City _____ State _____ Zip Code _____ Phone No. _____

E-Mail Address _____ Emergency Phone No. _____

Denomination _____
 Congregation and City _____ or Synod _____ Pastor _____

Our child has permission to take part in all camp activities under supervision, and we agree that the camp or its personnel will not be held responsible for accidents arising therefrom. I give the camp staff permission to seek medical treatment for my child in case of injury or illness. I also give permission for the use of photographs, video, and electronic images including my child or family in camp publicity.

Camper's Signature _____ Parent's/Guardian's Signature _____

Visa/ MC# _____ Exp. Date ____/____/____ Signature _____