



GFS camp will be held at the Alpine Camp and Conference Center in the San Bernardino Mountains on the weekend of September 19-21, 2014. Alpine is a quiet, peaceful place where we can worship, complete badge work, make crafts, hike and play outdoor sports! The camp is for 2 nights with 5 meals.

The sleeping facilities are like sleeping in a dorm – indoor bathrooms and showers, 4 girls to a room, either a sleeping bag or sheets/blankets can be used. Clean and comfy!!

Visit the camp website at www.alpine-cc.org

3 levels of payment are available. Each registrant can choose to pay whichever tier is best for her.

Price A - member pays full price of \$125 (using her own resources and any funds that the branch/parish is able to help her raise.)

Price B - member pays \$85 (using her own resources and any funds that the branch/parish is able to help her raise.) Diocese of LA subsidizes remainder of fees.

Price C - member pays \$45 (using her own resources and any funds that the branch/parish is able to help her raise.) Diocese of LA subsidizes remainder of fees.

Everyone gets to participate in all activities, no matter which level she pays.

See next page for registration information. All adults should have a current Certificate for Prevention of Sexual Misconduct. Contact Margaret Nolde if you need assistance registering for the program.

Please call Margaret Nolde to check about space availability before registering.

714-330-1156.

THE GIRLS FRIENDLY SOCIETY, DIOCESE OF LOS ANGELES



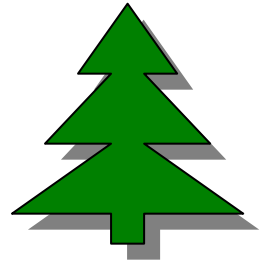
2014 CAMP REGISTRATION FORM
SEPTEMBER 19-21, 2014 (FRIDAY- SUNDAY)

ALPINE CAMP AND CONFERENCE CENTER
LOCATED NEAR BLUE JAY, IN THE SAN BERNARDINO MOUNTAINS

WWW.ALPINE-CC.ORG

Please check which applies to you

Girls 8-21 years old ☐ Parent/Leader ☐
Questions? Contact Margaret Nolde 714-330-1156



Full Name: _____

Home Address: _____ City/State/Zip _____

Age: _____ Birthdate: ____/____/____ Email: _____

Home Phone #: _____ Cell Phone #: _____

Parent (s) Name (*Applicable if under 21 years old*) _____

Address: _____ City/State/Zip _____

Home Phone #: _____ Cell Phone # _____

A Participation Agreement, Waiver of Liability & Release Agreement, and
Medical/ Emergency information are required with final payment.

REGISTRATION DEPOSIT: \$25.00, WHICH COUNTS TOWARDS THE FINAL PAYMENT
Deposit is NON-REFUNDABLE but is TRANSFERABLE TO A NEW CAMPER

Mail checks payable to GFS/LA to: C. Otiende (GFS Treasurer), 2433 N. Eastern Ave, #502, Los Angeles, CA 90032

Mail Forms to: Mrs. Beverlee Waters, 14190 Heritage Court, Victorville, CA 92392

We understand that families have varying abilities to pay for camp. Price A is the actual cost of the 2 nights and 5 meals at camp. Prices B and C are the partially- and fully- sponsored rates. Each camper receives the same high-quality experience, regardless of amount paid.

- Price A - \$125 per camper
- Price B - \$ 85 per camper
- Price C - \$ 45 per camper

Additional financial assistance can be requested (ie: for sibling members and challenging financial circumstances). Please explain extent of assistance needed on back of form. Additional aid will be granted on a case by case basis, according to the resources of GFS/LA. The \$25 deposit is required of everyone.

*****Please keep a copy of this form for your records.*****

Balance of Registration Payment will be due No Later than September 10.

To be completed by registrar:			Allergies: _____ _____ _____
Deposit _____			
Amount	Date	Check Number	
Balance _____			
Amount	Date	Check Number	