



2019 REGISTRATION FORM

PO Box 229, Arcadia, MI 49613
Website: camp-arcadia.com

Phone: 231-889-4361
E-mail: camp-arcadia@camp-arcadia.com

Please use one form per family at same address.
For teen, men's and women's retreats use a separate form for each registrant.

OFFICE USE

RM# _____

DATE _____

Name (s) _____

Address _____
STREET CITY ST ZIP

Phone Numbers: Home _____ Cell _____

E-mail _____ Home Church New Hope
[FOR CONFIRMATION PURPOSES] City Hudsonville, MI

REGISTRANTS

LIST ALL REGISTRANTS AS YOU WISH THE NAME TO APPEAR ON NAME TAG, EVEN IF NAMES APPEAR ABOVE.

Name [FIRST, LAST]	Birth Date [MM/DD/YYYY]	Gender M / F	Grade [NEXT YEAR]
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

RETREAT PREFERENCE

WRITE THE RETREAT CODE BELOW IN ORDER OF PREFERENCE

MR	1 ST	CHOICE
_____	2 ND	CHOICE
_____	3 RD	CHOICE
_____	4 TH	CHOICE

- This is a group reservation. Name of contact person is David Rufner
- Wish to celebrate birthday/anniversary of _____ on _____ [MM/DD]
- Wish to dine with or near _____
- This is my/our first time at Camp Arcadia
- Does anyone in your family have dietary restrictions or food allergies _____

- Women's and Men's retreat
Thursday night add on

Photo/Media Release: By registering, I grant Camp Arcadia and its agents the right to use, reproduce, assign and/or distribute photographs, films, video tapes and sound recordings of me, for use in materials they may create for the sole purpose of promoting Camp Arcadia

HOUSING AND OTHER PREFERENCES

Please rank any of the following that are acceptable using 1ST, 2ND, 3RD, etc

- Traditional Inn room
- Inn room with private bath, 2nd floor (Surcharge Applies)
- Inn room with universally accessible private bath, 1st floor (Surcharge Applies)
- Camp-owned cottage (Surcharge Applies)
- ASPEN CEDAR SPRUCE BIRCH JUNIPER
- Need 1st floor traditional inn room for health reasons
- Single person in room (Surcharge Applies)
- Dorm in assembly building
- No housing needed [Commuter Rate Applies]

I'm staying at: _____

If you are registering for family or Labor Day retreats:

- Teens 15 yrs. and older are to share room with parents
- Need an 18-month pac-n-play
- Need a dining room booster chair
- Need a dining room high chair

If you are registering for a teen, men's or women's retreat then:

Roommate choice 1. _____
2. _____

- I am NOT willing to take a top bunk
- For teen week registrants, adult t-shirt size:
S M L XL XXL _____

DEPOSIT

A. Total number of paying guests _____ B. Minimum deposit per person \$ _____
C. Total deposit enclosed \$ _____ [A x B]

Payment method: Check [payable to Camp Arcadia] Discover, VISA or MasterCard CVV _____

Card number: _____ Exp. [MM/DD] _____ Signature _____

FOR YOUR SECURITY PLEASE DO NOT FAX OR EMAIL THIS FORM.