## **Lamine Baptist Association/Gasconade Association Youth Camp**

## July 17-21, 2022

Name (please Print)			☐ Male ☐ Female Birthdate//		
Grade you will be entering	the fall of 2022	_ Church you attend			
Address		City	State	Zip Code	
Home Phone	Cell	Email			
Name of parents/Guardian		Phone			
Emergency Contact Person		Relationship		Phone	
Alternate Contact Person		Relationship _	F	Phone	
Person responsible for pick	ing up camper				
Adult T-Shirt: □ Sm □ M					
Ia offered by the Lamine Bapt					
5-9. I hereby give consent		•		•	
I ☐ do ☐ do not give per future promotions.	ermission for the Lamir	ne Baptist Association to	photograph my chil	d for the purpose of	
Parent/Guardian Signature				Date//	
Registration begins May 1 a and medical information, w With two associations coaccepted once full, so ge	orith a \$50.00 deposit w	hen registering. Remair	ing balance will be o	lue the day of camp.	
	Mail Regis	tration Forms and Depo	sits To		
	Lan	nine Baptist Association			
	1	3570 N. State Hwy 5			
	Sui	nrise Beach, MO 65079			
		Official Use Only			
Date Forms Received/	/ Amt. Enclosed	\$ C	neck #	Balance Due \$	