Information Needed for Registration

Church Group Set-up

Full Church Name _____

BMA Church yes _____ no _____

Church Billing Address (Street, City, Zip) _____

_____

Church Phone _____

Church Email _____

Main Contact Person _____

Main Contact Person for Church Set-up

Full Name _____

Date of Birth _____

Male or Female male _____ female _____

Primary Address (Street, City, Zip) _____

_____

Cell Phone _____

Email _____

Registration Info

Which camp are you requesting spots for?

_____ Girls Discipleship Retreat (June 9-12)

_____ Combo Camp (June 14-17)

_____ Pre-Teen Camp (July 5-8)

_____ Ark-La-Tex Camp (July 12-15)

Student Camp (July 19-22)

Please let us know how many you will have in attendance in each category:

Male		Female	
0-3yr	_____	0-3yr	_____
4-5yr	_____	4-5yr	_____
6-8yr	_____	6-8yr	_____
9-14yr	_____	9-14yr	_____
15-17yr	_____	15-17yr	_____
18-22yr camper	_____	18-22yr camper	_____
18-22yr sponsor	_____	18-22yr sponsor	_____
23yr or older sponsor	_____	23yr or older sponsor	_____