



# YOUTH REGISTRATION PROGRAMMED RETREAT

*Online registration is also available at [GLLM.org](http://GLLM.org)*

*Please complete all fields and mail to: Green Lake Lutheran Ministries, 9916 Lake Avenue South, Spicer, MN 56288*

*A note on individual registrations: We encourage you to reach out to your church to register as a group and provide chaperones that can stay in cabins at night. Please call our office prior to registration to ensure we can accommodate individual registrations as there are times when we may not be able to.*

## **YOUTH PARTICIPANT INFORMATION**

Camper Name \_\_\_\_\_

Pronouns \_\_\_\_\_ Gender \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade \_\_\_\_\_

Allergies / Dietary Needs \_\_\_\_\_

Parent(s)/Guardian(s) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent/Guardian Phone Number 1 (\_\_\_\_\_) \_\_\_\_\_

Parent/Guardian Phone Number 2 (\_\_\_\_\_) \_\_\_\_\_

Parent/Guardian Email \_\_\_\_\_

Church and City (no abbreviations please) \_\_\_\_\_

## **PROGRAM INFORMATION**

Camp Program & Dates \_\_\_\_\_

Roommate request \_\_\_\_\_

## **PERMISSIONS** *Please check all that apply.*

- My child has permission to take part in all camp activities under supervision, and I agree that the camp and/or it's personnel will not be responsible for accidents arising therefrom.
- I give permission to transport my child for camp programs and emergencies.
- I give permission for the use of photographs, videos, audio, and electronic images including my child in camp promotions.

Parent/Guardian Signature \_\_\_\_\_

## **PAYMENT OPTIONS**

I will be paying by:  Check  Cash  Credit Card  Applied for Scholarship

### **CREDIT CARD**

Name on Credit Card \_\_\_\_\_

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Security Code \_\_\_\_\_ Signature \_\_\_\_\_