

2025 FAMILY CAMP REGISTRATION

~Online registration is also available at GLLM.org~

Please complete all fields and mail to:

Green Lake Lutheran Ministries, 9916 Lake Avenue South, Spicer, MN 56288

FAMILY INFORMATION

Family Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (_____) _____

Email _____

Church and City (no abbreviations please) _____

Family Members (Include name, pronouns, gender, birth date, grade and t-shirt size)

PROGRAM INFORMATION

Family Camp Program & Location _____

Week _____

PERMISSIONS *Please check all that apply.*

- My child/ren 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/ren for camp programs and emergencies.
- I give permission for the use of photographs, videos, audio, and electronic images including family members in camp promotions.

Signature _____

PAYMENT OPTIONS *Please check your preferences.*

Fee Levels: Supported Fee (Subsidized by Donations) Full Fee (True Cost of Camp)

I would like to pay: Full payment Deposit Only (\$150)

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 _____