

Summer Camps Registration Form

Please use a separate form for each child

Name _____

Entering Grade _____ Age _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

Parent/Guardian _____

If different than child's:

Street Address _____

City _____ State _____ Zip _____

Email _____

Day phone _____ Evening phone _____

Cell phone _____

Check the camp/s you would like to register for:

- | | |
|--|-------|
| <input type="checkbox"/> The Wonder of the Light (ages 4 - 6) | \$60 |
| <input type="checkbox"/> The Wonder of the Light (entering grades 1-6) | \$110 |
| <input type="checkbox"/> Serving in the Light (ages 4 - 6) | \$40 |
| <input type="checkbox"/> Serving in the Light (entering grades 1-6) | \$70 |

Confidential scholarships are available. To request, please contact Kathy Meyer: kathy.meyer@lakeharrietumc.org.

Total camp fee \$ _____

Make checks payable to:

Lake Harriet United Methodist Church
4901 Chowen Ave S
Minneapolis MN 55410

Office use only:

Date Check received _____