

**2008**  
**DIOCESE OF BAKER**  
**SUMMER CAMP PROGRAM**

NAME \_\_\_\_\_ M \_\_\_ F \_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

PARENTS/GUARDIAN NAME \_\_\_\_\_

Date of Birth \_\_\_\_\_ Grade entering in Fall 2008 \_\_\_\_\_

PLEASE CIRCLE: 1<sup>st</sup>-year camper    Returning camper

T-shirt size (adult):        S        M        L        XL        XXL

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I WOULD LIKE TO ATTEND:

\_\_\_\_\_ FAMILY CAMP (please fill out additional form)        Fee: \$50 per person  
June 14-16, at Ascension Camp in Cove        Cap of \$250

\_\_\_\_\_ HIGH SCHOOL CAMP (entering grades 10-12)        Fee: \$120  
June 20-23, at Bishop's Residence in Bend

\_\_\_\_\_ JUNIOR HIGH CAMP (entering grades 7-9)        Fee: \$95  
June 25-27, at Bishop's Residence in Bend

\_\_\_\_\_ UPPER ELEMENTARY CAMP (entering grades 4-6)        Fee: \$95  
June 29-July 1, at Bishop's Residence in Bend

Registration forms must be signed by the Pastor or Youth Minister for all High School and Junior High participants.

Pastor or Youth Minister Signature: \_\_\_\_\_

Note: You **MUST** complete the  
**Authorization for Emergency Medical  
Treatment and Release of All Claims**  
form on the back of this sheet.

*Submit registration and payment to:*  
**Diocese of Baker  
Summer Camps  
PO Box 5999  
Bend, OR 97708**