

**REGISTER HERE!**  
Camp Shiloh 2009  
Registration DUE by June 1, 2009

Name \_\_\_\_\_ Gender: M or F  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Email for confirmation \_\_\_\_\_  
Home church (if any) \_\_\_\_\_  
School \_\_\_\_\_  
Home phone \_\_\_\_\_ Cell phone \_\_\_\_\_  
In case of emergency contact (not sharing residence with camper) \_\_\_\_\_  
phone \_\_\_\_\_

**T-Shirt size:** (Adult) small medium large x-large xx-large  
**Grade as of September '09** \_\_\_\_\_

I'd like to room with: (first and last name)

1. \_\_\_\_\_ 2. \_\_\_\_\_
3. \_\_\_\_\_ (please note that friends may not always be roomed together.)

**Week Attending:**

\_\_\_\_\_ Going INTO Grades 6 and 7, **June 23 - 27**  
\_\_\_\_\_ Going INTO Grades 8 and 9, **June 30 - July 4**  
**\*\*\*\*Notice the date changes\*\*\*\***

Parent Signature \_\_\_\_\_  
Camper Signature \_\_\_\_\_

NOTE: signatures signify an understanding of and agreement to the following of ALL camp rules, including the "Behavioral Guidelines" as outlined in the brochure.

Please make checks payable to: **CAMP SHILOH**  
The Camp fee is \$199.00  
Please mail the check and registration form to:  
**Camp Shiloh PO Box 547, Lynden WA 98264**

**\*\*\* Please also fill out the LIABILITY FORM\*\*\***