



Lutheran Outdoor Ministries Indiana-Kentucky

Summer Camp REGISTRATION Form

(DO NOT USE IF REGISTERING ONLINE)

Name: _____ Gender: M F Birthdate: ____ / ____ / ____

Address: _____ Current Grade (as of today): _____

City: _____ State: _____ Zip: _____ Email*: _____

*Please provide a valid email address for the parent or legal guardian of the camper.

Phone: _____ Home Congregation: _____ City _____

Lake Luther Lutherwald Lutheran Hills

Camp Program Attending: _____

(Be sure program chosen is for the grade camper will be entering in the fall)

Week Attending: _____ 2nd Choice: _____

Buddy Request: _____

CAMP FEE CALCULATION

- 1. Total program fee \$ _____
- 2. 2nd child discount - _____
- 3. Total amount due = _____
- 4. Amount congregation pays - _____
- 5. Deposit or amount paid now - _____
- 6. Balance owed by family = _____

Voluntary Donation* \$ _____

Your gift helps pay for Reading Camp and camper scholarships.

In signing this application, I give permission for use of photographs including my son or daughter in camp publicity. I waive the right to inspect or approve any photo used for such purposes.

_____ Parent Signature
_____ Parent Name (Please Print)
_____ Pastor's Signature*

* Required if congregation makes partial or full payment

TO REGISTER: Mail one completed form per camper and a \$50 deposit per camper to Lutheran Outdoor Ministries, 5215 N 450 W, Angola IN 46703. Make checks payable to "Lutheran Outdoor Ministries." The deposit is non-refundable, but is a part of the total cost.

SECOND CHILD DISCOUNT. Discount \$50 for each additional child from the same family in the same week or later week. Please indicate name of first child attending and session if forms are not sent in together.

BUDDY REQUEST. Campers of the same age and grade are assigned to cabin groups. Campers may request one friend to be with them in a cabin. If these requests are for the same age/grade and are mutual, we will try to honor them.

FINANCIAL ASSISTANCE. Lutheran Outdoor Ministries-Indiana/Kentucky works with congregations to ensure that no child is denied a camp experience due to financial hardship. Contact us by email at info@lomik.org or by phone at (260) 667-7750.

REFUND POLICY. A deposit of \$50 or full payment must be received with the completed registration form. The payment less the deposit is refundable upon written request at least 3 weeks prior to the camp week.

OUR MISSION: Lutheran Outdoor Ministries Indiana-Kentucky (LOMIK) welcomes all and provides Christ-centered programs for building faith and life-long relationships in a safe, caring, and fun environment.

OUR VALUES: Faith – Family & Community – Service – Integrity

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