



Family Camp Registration

CONTACT PERSON:		
FIRST	MI	LAST
STREET ADDRESS		
		APT #
CITY		
		STATE
		ZIP
DAY PHONE		
		EVENING PHONE
EMAIL		

Camper Name	Age	Arrival Date	Departure Date	# of Nights	Rate	Total Amount
Electricity: <input type="checkbox"/> YES <input type="checkbox"/> NO (\$5/Night surcharge for each tent or cabin with electricity)					\$5/Night	
Total Amount (Minimum 50% Deposit Required upon registration)						

TENT CABIN Vegetarian(s): # of campers preferring vegetarian meals: _____
 We will do our best to give you your favorite tent or cabin. Requests are processed in order received.

Please list your top 3 options here: #1. _____ #2. _____ #3. _____

Help us keep in touch with your family with our e-newsletter; add all email addresses here:

_____, _____, _____

Payment Information

Amount Enclosed \$ _____ CHECK # _____ MONEY ORDER # _____ DATE: _____
 VISA MASTER CARD # _____ Exp DATE _____ Card ID # _____
(Last 3 digits on back of credit card)

 CARDHOLDER'S NAME (Please Print)

 CARDHOLDER'S SIGNATURE

Camper Demographics

We'd appreciate your help to track OFRC Demographics. Participation in the following is optional and at your discretion.

Ethnicity: Please check all that apply. Annual Family Income:

<input type="checkbox"/> African American	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> under \$25,000	<input type="checkbox"/> \$75,000 - \$100,000
<input type="checkbox"/> Asian	<input type="checkbox"/> Mixed Race (please name) _____	<input type="checkbox"/> \$25,000 - \$50,000	<input type="checkbox"/> over \$100,000
<input type="checkbox"/> Caucasian	<input type="checkbox"/> Other _____	<input type="checkbox"/> \$50,000 - \$75,000	
<input type="checkbox"/> Latino			