



Confirmation Retreat 2012

Registration Form

Photocopy and complete the Registration and Health Form for each participant.

Information and forms may be accessed at youth.igrcamp.org.

Health Forms MUST be returned with Registration Forms.

Forms should be completed and returned as a group with payment to:

Illinois Great Rivers Conference Confirmation Retreats

PO Box 19207, Springfield, IL 62794-9207

Attn: Camping

www.igrcamp.org

Cost: \$88.00 per person (including adult chaperones)

_____ number of persons attending

\$_____ total amount enclosed

<u>Date of Retreat</u>	<u>Registration Deadline</u>	<u>Location</u>	<u>Retreat Dean</u>
February 10 - 12	January 13	Living Springs, Lewistown	Bill Pyatt
February 17 - 19	January 20	East Bay, Hudson	Keith Michaels
March 9 - 11	February 10	East Bay, Hudson	Keith Michaels
March 16 - 18	February 17	Little Grassy, Makanda	Kim Stuby

Local Church Information:

Church Name: _____

District: _____

Address: _____

City/State/Zip: _____

Phone: _____

E-Mail: _____

Contact Person: _____

Number of participants:

Youth: _____ Adults: _____

Individual Youth/Adult Information:

Name: _____

Grade: _____ Age _____ DOB ____/____/____ Gender _____

Address: _____

City/State/Zip: _____

Parent/Guardian: _____

Home Phone: _____

Work Phone: _____

E-Mail: _____

Counselor(s) attending with youth: _____
