



Camp Sawtooth

2012 Registration Form

directorscampsawtooth@yahoo.com ~ www.campsawtooth.org

Attend the camp of the grade you will be going into
Fall of 2012. Graduating seniors welcome!

MAIL REGISTRATION TO:

BEFORE MAY 20TH

Camp Sawtooth
PO Box 101
Nampa, ID 83653
(208) 899-2073

AFTER MAY 20TH

Camp Sawtooth
HC 64 Box 8290
Ketchum, ID 83340
(208) 726-1155

PLEASE PRINT CLEARLY

Camper Name _____

Address _____

City _____ ST _____ Zip _____

Phone _____ Cell _____

M/F ____ Age ____ Birthday _____

Grade/Fall '12 _____

Church _____

CABIN MATE (Request **ONE**) _____

Is this your first year at camp? Yes ____ No ____

Who referred you? _____

MEDICAL RECORDS FORM:

A separate medical/parental consent form **MUST BE FILLED OUT AND RETURNED** at least two weeks before camp. All forms are available to download at www.campsawtooth.org.

PARENT/GUARDIAN INFORMATION (Please print)

NAME _____

Email address: _____

Address: _____

City _____ ST _____ Zip _____

PLEASE INDICATE T-SHIRT SIZE

Adult T-shirt size: Small ____ Medium ____ Large ____

X-Large ____ XX-Large ____ XXX-Large ____

<u>FOR OFFICE USE ONLY:</u>	<u>PAYMENTS/DATES:</u>
Deposit \$ _____	
Camp Sawtooth Scholarship \$ _____	
Church Scholarship \$ _____	
Balance Due \$ _____	

REGISTER Before June 1st to save \$20.			Please Check One	
GROUP	DATE	ACTIVITY	Before 6/1/12 FEE	After 6/1/12 FEE
5 th & 6 th	June 24 -29	Swimming	<input type="checkbox"/> \$260	<input type="checkbox"/> \$280
3 rd & 4 th	July 1 - 4	Swimming	<input type="checkbox"/> \$170	<input type="checkbox"/> \$190
7 th & 8 th	July 8- 13	Ice Skating	<input type="checkbox"/> \$260	<input type="checkbox"/> \$280
9 th & 10 th Includes hearing impaired	July 15 -20	Golfing on the putting greens	<input type="checkbox"/> \$265	<input type="checkbox"/> \$285
11 th & 12 th	July 22 - 27	White Water Rafting	<input type="checkbox"/> \$300	<input type="checkbox"/> \$320

PAYMENT METHODS

CREDIT CARD (Payments must be paid in full)
ADD \$5.00 CREDIT CARD PROCESSING FEE

Name on card _____

Visa/MC # _____

Exp Date ____ / ____ Security Code: (3-digit) _____

Visa/MC Amount \$ _____ (add \$5.00 fee)

Signature required _____

CHECK OR MONEY ORDER TO: *Camp Sawtooth*
\$75 deposit required--balance due 2 weeks before camp.

Check/MO Amount enclosed \$ _____ Check # _____

DONATION (tax-deductible) \$ _____ Check/MO/Visa

CHURCH SCHOLARSHIP

Church Name _____ Amount \$ _____

Pastor's Signature: _____
(Required)

Transportation: My Child will be returning home from camp
with (name of person or church): _____

Relationship: _____