

Congregation: _____ Mission Center: _____

Your Grand Total of fees do not meet actual costs—offerings are needed to supplement the costs of reunion.

Make check payable to : Camp Bountiful **\$25.00 Deposit Required for Reservation !** Mail registration form to **Camp Registrar**: **Kirk Cross** **glfo@sbcglobal.net**
2862 Johnstown Road, Suite 111
Columbus, Ohio 43219
614-475-2070, ext. 10

Please understand that cabin space is limited. Get your registrations in early!

Housing will be assigned according to the order in which registrations are received, taking specific location requests into consideration. However, priority consideration will be given to meet age, health, and disability needs. Therefore, indicate anything that would affect the Registrar's decision about your housing assignment. Final assignment will be under the discretion of the registrar.

IMPORTANT INFORMATION IF SPONSORING A MINOR:

All minors must be sponsored by and attend with an adult. **Minors sponsored by someone other than their parent or guardian must register on a separate form.** The sponsor's name should be entered in the Adult Name (line A).

If parent or guardian is not attending, signature of sponsoring adult and signature of parent or guardian approving the sponsorship:

Sponsor: _____

Parent/Guardian: _____

In case of **MEDICAL EMERGENCY** : I understand every reasonable effort will be made to contact the parent(s) or guardian of minors. In the event I cannot be reached, I hereby give permission to the physician selected by the reunion director to hospitalize, secure proper treatment for, and to order injections, anesthesia, surgery, or other medical procedure deemed necessary for my child (children) as named below.

Signature: _____ Date: _____

Children's names:

Notes to registrar: _____
