

SUMMER CAMP REGISTRATION FORM

Camper Name _____

Parent/Guardian _____

Address _____

Gender _____ Birthday _____

Email _____ Phone _____

Church _____

Which Camp? _____

Name of ONE Cabin Friend _____

Cabin friend requests must be mutual in order to be considered.

T-Shirt Size (Please specify Youth or Adult) _____

Payment Information:

Camp Fee _____

Deposit (at least \$50 required) - _____

Total Amount Due = _____

Checks can be made payable to Amigo Centre.

You can also pay by credit card:

Credit Card Type _____ Exp. Date _____

Credit Card # _____

Signature _____

Please mail this form, along with your payment, to:

Amigo Centre

26455 Banker Rd

Sturgis, MI 49091



You can also register online: www.amigocentre.org