

# Reunion Registration Form

Please complete **both sides** of this registration form and send to the appropriate Reunion Registrar or Director, as listed on the reunion information. You may want to make a copy of the completed registration form for your records. **For additional registration forms, visit the Mission Center website at [www.cofchrist-gpnw.org/camp](http://www.cofchrist-gpnw.org/camp).**

REUNION SELECTION – Check one per form		
<input type="checkbox"/> Samish Adult <input type="checkbox"/> Remote Family <input type="checkbox"/> Lewis River <input type="checkbox"/> Samish Family <input type="checkbox"/> NW Support Group Singles		
REGISTRATION INFORMATION		
Name Adult 1:	Priesthood Office (if applicable):	
Name Adult 2:	Priesthood Office (if applicable):	
Name Youth 1:	Age:	Entering Grade:
Name Youth 2:	Age:	Entering Grade:
Name Youth 3:	Age:	Entering Grade:
Name Youth 4:	Age:	Entering Grade:
Full Address:		
Phone:	Email Address:	
Home Congregation:		
EMERGENCY INFORMATION		
Emergency Contact:	Emergency Contact Phone:	
Name of Physician(s):	Physician(s) Phone:	
Name of Insurance Carrier(s):	Insurance Policy Number(s):	
MEDICAL INFORMATION		
Please list below if any of the registrants have medical conditions we need to be aware of, and who has them (include such conditions as severe allergies, asthma, diabetes, seizures, etc.):		
Is anyone taking medication? (If so, list who and dosage taken):		
Special dietary needs (List what and to whom they pertain):		
<i>I hereby give my permission for all registrants to receive emergency care. In an emergency, the information contained in this document may be released to qualified medical personnel.</i>		
<b>X</b> Signature:	Date:	
YOUR MINISTRY		
<i>I/we would be willing to help with (please list first name of applicable family member):</i>		
<input type="checkbox"/> Worship-Name:	<input type="checkbox"/> Special Music-Name: <input type="checkbox"/> Vocal <input type="checkbox"/> Instrumental-Instrument:	<input type="checkbox"/> Presiding-Name:
<input type="checkbox"/> Campfire-Name:	<input type="checkbox"/> Teach/help w/class-Name:	<input type="checkbox"/> Recreation-Name:
<input type="checkbox"/> Children/Nursery-Name:	<input type="checkbox"/> Serving Meals ( <u>required</u> at some reunions)-Name:	
<input type="checkbox"/> Other (please specify, including name):		
RELEASE		
<i>I give permission for any pictures or likenesses of myself and/or family members to be used in Community of Christ publicity:</i>		
<b>X</b> Signature Adult 1:	Date:	
<b>X</b> Signature Adult 2:	Date:	

**SAMISH ADULT REUNION - LODGING AND REUNION FEES**

<b>Lodging</b>	<input type="checkbox"/> Cabin without restroom: \$9/night = \$54 for week (shared) <input type="checkbox"/> RV Space: \$9.00 per night <input type="checkbox"/> Cabin with restroom: \$12/night = \$72 for week (shared) <input type="checkbox"/> Tent Space: \$2.00 per night <input type="checkbox"/> Medical need <input type="checkbox"/> Other:
<b>Full or Part Time</b>	<input type="checkbox"/> Full time <input type="checkbox"/> Part time - <b>List days attending:</b>
<b>Registration Fee</b>	<input type="checkbox"/> \$72 for week or <input type="checkbox"/> \$12 per day
<b>Meals</b>	<input type="checkbox"/> \$90/person for week or <input type="checkbox"/> \$5.00/meal for registered guests (\$8.00 per meal drop-in meal rate)
<b>Activity Fee</b>	<input type="checkbox"/> \$25 per person
<b>Late Fee</b>	<input type="checkbox"/> \$10 per person if received after June 1
<b>Deposit</b>	<input type="checkbox"/> \$30 deposit or <input type="checkbox"/> Full payment - due with registration by June 1

**REMOTE FAMILY REUNION - LODGING AND REUNION FEES**

<b>Lodging</b>	<input type="checkbox"/> Cabin (assigned on first come basis): \$50 cabin cleaning deposit; check not cashed if cabin left clean		
<b>Registration Fee</b>	Family*	<input type="checkbox"/> \$515 by 6/10	<input type="checkbox"/> \$615 after 6/10
	Individual (12 & over)	<input type="checkbox"/> \$165 by 6/10	<input type="checkbox"/> \$190 after 6/10
	Child (4-11)	<input type="checkbox"/> \$125 by 6/10	<input type="checkbox"/> \$150 after 6/10
	Birth to 3	<input type="checkbox"/> \$48 by 6/10	<input type="checkbox"/> \$48 after 6/10
	Part-time with meals	<input type="checkbox"/> \$35/day Individual	<input type="checkbox"/> \$25/day Child
Single meal:	<input type="checkbox"/> \$6 (only available if participation is two meals or less per day with no overnight stay)		
<b>Meals</b>	Included in full-time registration fee OR <input type="checkbox"/> \$5/meal for part-timers		

*\*Family: Up to two adults and six children or four adults residing in the same household.*

**LEWIS RIVER REUNION - LODGING AND REUNION FEES**

<b>Lodging</b>	<input type="checkbox"/> Cabin - List 3 choices (first come basis):		
	<input type="checkbox"/> RV Space - Length of RV: _____feet		<i>(Lodging is included in registration fee.)</i>
	<input type="checkbox"/> Tent Space		
	<input type="checkbox"/> Lodge Room (Elderly & physically challenged get first consideration)		
<b>Registration fee</b>	Family**	<input type="checkbox"/> \$330 by 6/1	<input type="checkbox"/> \$370 after 6/1
	Individual (5-adult)	<input type="checkbox"/> \$90 by 6/1	<input type="checkbox"/> \$100 after 6/1
	Under 5	<input type="checkbox"/> FREE	

*\*\*Family: Four or more parent(s) and dependent children from the same household.*

**SAMISH FAMILY REUNION - LODGING AND REUNION FEES**

<b>Lodging</b>	<input type="checkbox"/> Cabin without restroom (47 cabins): \$54 (\$9.00 per night)		
	<input type="checkbox"/> Cabin with restroom: \$36/person or \$72/family - <i>Elderly &amp; medically challenged get first consideration.</i>		
	<input type="checkbox"/> I'm willing to have a roommate		
	<input type="checkbox"/> I'm not willing to have a roommate		
<b>Registration fee</b>	<input type="checkbox"/> RV Space: \$54 (\$9/night) - Length of RV: _____feet		
	<input type="checkbox"/> Tent Space: \$12-12 spaces behind last cabin row		
<b>Registration fee</b>	<input type="checkbox"/> \$72 per person for week (under 3 FREE) or		<input type="checkbox"/> \$12 per day
<b>Meals</b>	Adults (15 & over):	<input type="checkbox"/> \$85.00/person for week or	<input type="checkbox"/> \$5.00/camper meal <input type="checkbox"/> \$8.00/drop-in meal
	Youth (8-14):	<input type="checkbox"/> \$42.50/person for week or	<input type="checkbox"/> \$2.50/camper meal <input type="checkbox"/> \$4.00/drop-in meal
	Child 3-7:	<input type="checkbox"/> \$21.25/person for week or	<input type="checkbox"/> \$1.25/camper meal <input type="checkbox"/> \$2.00/drop-in meal
	Child under 3:	<input type="checkbox"/> FREE	
<b>Late Fee</b>	<input type="checkbox"/> \$10 per person or \$30 per family if received after June 30		
<b>Deposit</b>	<input type="checkbox"/> \$30 deposit or full payment due with registration by June 1		

**NW SUPPORT GROUP SINGLES REUNION - LODGING AND REUNION FEES**

<b>Lodging</b>	<input type="checkbox"/> Cabin without restroom <input type="checkbox"/> Cabin with restroom <input type="checkbox"/> RV Space <input type="checkbox"/> Tent Space <i>Prices will follow registration.</i>
<b>Registration Fee</b>	<input type="checkbox"/> \$198.11 US
<b>Deposit</b>	<input type="checkbox"/> \$30 by August 10

**YOUR PAYMENT TOTALS**

*Please use the area to the right to total the applicable fees for your reunion. Not all reunions have fees for each line - only use the ones listed for your reunion.*

**MAKE ALL CHECKS PAYABLE TO  
"COMMUNITY OF CHRIST"**

*\*\*\* Freewill offerings cover the costs of reunion not included in the registration fees. Advance offerings are appreciated to help meet the reunion budget.*

Total Lodging:	\$ _____
Registration Fee:	\$ _____
Meals:	\$ _____
Activity Fee:	\$ _____
Late Fee:	\$ _____
Advance Freewill Offering***:	\$ _____
Total Reunion Cost:	\$ _____
Less Deposit or Payment:	\$ _____
Balance Due:	\$ _____