

FAMILY INFORMATION

Husband's name: _____

Wife's name: _____

Last name: _____

Address: _____

City: _____ State: _____ ZIP Code: _____

Phone: _____

E-mail: _____

Child's name: _____ DOB: _____

Child's name: _____ DOB: _____

Child's name: _____ DOB: _____

Child's name: _____ DOB: _____

Child's name: _____ DOB: _____

Child's name: _____ DOB: _____

FAMILY CAMP 2010

OCTOBER 9-16



3. MEALS

Adult meal package (12+): \$140 x _____ people = _____

Child meal package (3-11): \$90 x _____ people = _____

Individual meals (check desired meals below):

Adult (12+): _____ meals x _____ people x \$7 = _____

Child (3-11): _____ meals x _____ people x \$4.50 = _____

	Saturday	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Breakfast	X							X
Lunch	X							Brunch
Dinner								X

1. HOUSING FEES

Guest lodging: \$385 x _____ room(s) = _____

Pine Lodge Cabins: \$175 x _____ cabin(s) = _____

If possible, we would like to be housed near _____

CAMPSITE FEES (7 nights)

Primitive campsites: \$105 x _____ site(s) = _____

Electric campsites: \$140 x _____ site(s) = _____

Electric and water campsites: \$175

CAMPSITE INFORMATION

One site = one RV plus up to one same-family tent or up to two same-family tents. Rates apply for 1-6 people per site. Add \$7 for each additional person.

2. FAMILY CAMP FEE

(Applies to everyone who will be attending)

4-years and up: \$35 x _____ = _____

0-3-year-olds No Charge: \$0 _____

ATTENTION FIRST YEAR FAMILIES

HOW DID YOU HEAR ABOUT FAMILY CAMP?

Please take a moment to describe (on the back of this form) how you heard about Family Camp.

PAYMENT METHOD

Check (make payable to ALERT)

Credit: VISA Master Card

Visa/MC#: _____

CVC#: _____

Expiration Date: _____

Signature: _____

Total Paid: _____

Note: a 3% charge will be added to all credit card charges over \$200.

TOTAL FEES

1. Total Housing Fees: \$ _____

2. Total Family Camp Fees: \$ _____

3. Total Meal Fees: \$ _____

Total Fees: \$ _____

Payment Enclosed*: \$ _____

Total Due Upon Arrival: \$ _____

*A \$50 non-refundable deposit must be enclosed with your registration form. Registrations must be postmarked no later than September 25, 2010. For late registrations please call the number listed below.

Mail this form to: **FAMILY CAMP 2010**, One Academy Blvd. Box #482 Big Sandy, TX 75755

Phone: 903-636-2000, ext. 2101 Fax: 903-636-2013 events@alertacademy.com

Postmark your registration form by June 26, 2010 with full payment and receive a 5% discount on the total registration fee.