

Family Camp - Camp Meeting

Registration Form & Liability Release

Family (Last) Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____ Cell: _____

Home church & city: _____

By checking the box below *each adult listed below* acknowledges the following:

I hereby release the Double K/ Pacific NW Assoc of the Church of God, (hereafter DK-PNA), together with its agents & employees, from all actions, causes of action, damages, claims or demands which I, my heirs, executors, administrators or assigns may have against PNA and/or the above described parties for all personal injuries known or unknown which I or my children have or may incur by participating in the above activity. I, *the undersigned*, have read this release and understand all its terms. I execute it voluntarily and with knowledge of its significance.

I give Double K permission to use pictures of me or my kids for promotion.

I acknowledge there are no refunds after June 1st.

☐ Check before going on

Adults:

Print Adult # 1:	Signature: _____	email: _____
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs	
Print Adult # 2:	Signature: _____	email: _____
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs	
Print Adult # 3:	Signature: _____	email: _____
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs	
Print Adult # 4:	Signature: _____	email: _____
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs	

Children: ages 3-18

# 1 - Kids Name: _____	Age: _____	Grade in fall: _____	wants to: <input type="checkbox"/> Raft <input type="checkbox"/> Climbing Wall
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs		
# 2 - Kids Name: _____	Age: _____	Grade in fall: _____	wants to: <input type="checkbox"/> Raft <input type="checkbox"/> Climbing Wall
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs		
# 3 - Kids Name: _____	Age: _____	Grade in fall: _____	wants to: <input type="checkbox"/> Raft <input type="checkbox"/> Climbing Wall
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs		
# 4 - Kids Name: _____	Age: _____	Grade in fall: _____	wants to: <input type="checkbox"/> Raft <input type="checkbox"/> Climbing Wall
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs		
# 5 - Kids Name: _____	Age: _____	Grade in fall: _____	wants to: <input type="checkbox"/> Raft <input type="checkbox"/> Climbing Wall
Total days in attendance: <input type="text"/>	Which days? <input type="checkbox"/> Sunday <input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wed <input type="checkbox"/> Thurs		

Total adult # of days: Total kids # of days: # of babies age 2 & under: _____

Registration & Lodging Fee Worksheet

Put in the Number of Attendance Days (from bottom of page 1:)

1- Registration Fee which includes Double K facility fee

adults

Kids are 1/2 adult price

adult- # of
days times
\$7.00

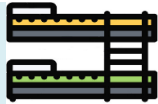
kids- #
of kid
days
*\$3.50

**TOTAL
Reg**

2- Lodging Fee

I / we wish to lodge in (check one):

To encourage participation of families, please call the office if you need financial help with lodging.


☐

in the dorm

☐

Female Dorm Rm

☐

Male Dorm

☐

Family Dorm *if available*

I wish to room with: _____

Total days in attendance: _____

Which Days?

☐ Sunday

☐ Mon

☐ Tues

☐ Wed

☐ Thurs

Total number of people needing dorm room: _____

Dorm fee: \$ _____ -

of people times # of days times \$10.00 (reg fee is \$28-32 per night)


☐

in an RV

RV length _____

Amps: _____

Preferred # Site _____

Check which days you'll be in RV spots?

☐ Sunday

☐ Monday

☐ Tues

☐ Wed

☐ Thurs

Total days in Full Service: _____

Total days in Partical Service: _____

Total days in No Hookup: _____

Full Service less facility fee is \$18/night

Partial service less facility fee is \$13.00/night

No Hookup less facility fee: \$8.00/night

Put in cost... in the blank below of which service needed:

Water, Electric & Sewer -
\$18 x # of days

Electric & Water -
\$13 x # of days

No Hookup -
\$8 x # of days

First 4 people in RV free

of extra people in RV at \$7.00 @ person- per night

X

of nights

Total cost Extra people

Total RV Fee:


☐

in a tent

days in attendance: _____
\$8.00 x # of days

Check which days?

☐ Sunday

☐ Monday

☐ Tues

☐ Wed

☐ Thurs

First 4 people in tent free

of extra people in tent \$7.00 @ person- per night

X

of nights

Total cost Extra people

Total TENT Fee: \$ _____ -

☐

in a hotel

☐

in other offsite

Total of registration fee

\$ _____ -

Transfer to pg bottom

Total of Lodging fee

Transfer to pg bottom

Fill out next page to determine **Food cost** amount.

Adventure Activities:

Adventure activities (rafting, climbing wall, and paintball) will be available for an additional fee at family camp. Sign up once here.

All Rafting & Wall Climb participants must have a **signed liability release**, signed by guardian if minor. **Confirm activity date when arriving at DK.**

Meals and food service:

Adult - (10 yrs old & up)

Child - (3-9 yrs old)

Babies - (2 & under - free meals)

Enter the number of meals requested in each box below, then total number of meals of total column, times that # by rate:

	Sunday	Mon	Tues	Wed	Thurs	Friday	Total #	Rate	Totals
Adult Breakfast								6.50	\$ -
Child Breakfast								3.25	\$ -
Adult Lunch								7.50	\$ -
Child Lunch								3.75	\$ -
Adult Dinner								9.00	\$ -
Child Dinner								4.50	\$ -
Food Total									\$ -
Registration Total									\$ -
Lodging Total									
Grand Total									

Refunds: There are no refunds after June 1st.

Encourage your pastor to come on Wednesday for Pastor Appreciation Day!

Please PRINT this registration form and mail to:

PO Box 98 Easton, WA 98925 **or save or scan & email to:** doubleK@doublek.org

You may pay 25% of your fee as a deposit and pay the rest on your first day of Family Camp.

www.doublek.org (509) 656-2304