

2010 Camp Hammer Registration Form

Please complete one form per camper.
Fax complete forms to 831.338.3002 or mail to:

Camp Hammer
21401 Big Basin Way
Boulder Creek, CA 95006

Camper Information

Name: _____

Phone: _____

Address: _____

Camper's Email: _____

City/State: _____

Birthday: _____

Zip/Postal Code: _____

Gender:
 Male
 Female

Additional Information

School Grade (As of September 2010): _____

School: _____

What church do you attend (if any)? _____

Preferred cabin mate first name: _____

Preferred cabin mate last name: _____

T-Shirt Size: Free t-shirt and Photo for all campers!

- Youth Medium
- Youth Large
- Adult Small
- Adult Medium
- Adult Large
- Adult X-Large

Parent/ Guardian Information

Father/ Guardian: _____

Mother/Guardian: _____

Home #: _____

Home #: _____

Work #: _____

Work #: _____

Cell #: _____

Cell #: _____

E-mail: _____

E-mail: _____

Camp Information

Indicate the camp week you would like your child to attend.

High School Camp

One week/ \$379
(entering grades 9-12)

- June 20-26th -HS

Junior Camp

One Week/ \$399
(entering grades 4-6)

- 1- June 27- July 3
- 2- July 4- 10th

Junior High Camp

One week/ \$409
(entering grades 7-9)

- JHA- July 11-17th
- JHB- July 18-24th
- JHC- July 25-31st
- JHD- Aug. 1-7th

Apostle

Two weeks/ \$439
(entering grades 10-12)

- A1- June 27- July 10th
- A2- July 11- 24th
- A3- July 25- Aug. 7th

Billing Information

First Name: _____

Zip/Postal Code: _____

Last Name: _____

Contact Phone#: _____

Billing Address: _____

Alternate Phone #: _____

City/State: _____

E-mail: _____

Price of Camp: \$ _____

Payment type:

Snack Shack Account \$ _____

- Check
- Visa/Mastercard

Water Bottle: (\$12.00) \$ _____

General Camp DVD: (\$10.00) \$ _____

Account #: _____

Would you like to donate to the Scholarship Fund?

Exp. Date __/__/__

- Yes
- No

Authorized Amount: \$ _____

Donation Amount: \$ _____

(Please note: A \$50 non-refundable deposit must accompany this registration form. The final balance is due 30 days before the start of the registered week of camp.)

Total: \$ _____

Cardholder's Name: _____

Cardholder's Signature: _____