



2019 Registration Form

Please complete one form per camper | Complete applications include the \$25 deposit

Fax complete forms to 831.338.3002 or mail to:

Camp Hammer, 21401 Big Basin Way Boulder Creek, CA 95006 | 831.338.3200 ext. 10

Camper Information

Name: _____

Phone: _____

Address: _____

Birthday: _____

City/State: _____

Gender: Male
 Female

Zip/Postal Code: _____

Additional Information

School Grade (As of September 2019): _____

School: _____

What church do you attend (if any)? _____

How did you hear about Camp Hammer? (Please check only one)

- School
- Church
- Friend
- Online Search
- Other

If other please explain: _____

Preferred cabin mate *full name*: _____

T-Shirt Size: Free t-shirt and Photo for all campers! Please check shirt size below:

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

Parent/ Guardian Information

Parent / Guardian 1: _____

Home #: _____

Work #: _____

Cell #: _____

E-mail: _____

Parent /Guardian 2: _____

Home #: _____

Work #: _____

Cell #: _____

E-mail: _____

Emergency Contact

(must be someone other than parent/guardian)

First Name: _____

Last Name: _____

Phone Number: _____

Camp Information

Please indicate the camp week you would like your child to attend.

<p><u>Junior Camp</u> One Week/ \$410 (Entering grades 4-6)</p> <p>○ <u>J1- June 16-22</u> ○ <u>J2- June 23-29</u> ○ <u>J3- June 30-July 6</u></p>	<p><u>Junior High Camp</u> One week/ \$415 (Entering grades 7-9)</p> <p>○ <u>JHA- July 7-13</u> ○ <u>JHB- July 14-20</u> ○ <u>JHC- July 21-27</u> ○ <u>JHD- July 28- Aug. 3</u></p>	<p><u>Apostle</u> Two weeks/ \$500 (entering grades 10-12)</p> <p>○ <u>A1- June 23-July 6</u> ○ <u>A2- July 7- July 20</u> ○ <u>A3- July 21 – Aug. 3</u></p> <p>Available to graduating seniors, too!</p>	<p><u>High School Camp</u> One week/ \$420 (entering grades 9-12)</p> <p>○ <u>HS- August 4-10</u></p> <p>Available to graduating seniors, too!</p>
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Billing Information

First Name: _____
 Last Name: _____
 Billing Address: _____
 City/State: _____

Payment type:

- Check
- Discover
- Mastercard
- Visa

Price of Camp: \$ _____
 Snack Shack Account \$ _____
 Water Bottle: (\$15.00) \$ _____
 General Camp DVD: (\$10.00) \$ _____

Account #: _____
 Exp. Date ____/____/____
 CVC Code: _____
 Authorized Amount: \$ _____

Would you like to donate to the Scholarship Fund?
 Yes
 No

Please note: A \$25 non-refundable deposit must accompany this registration form.

Donation Amount: \$ _____

Cardholder's Name: _____
 Cardholder's Signature: _____

Total: \$ _____