

40 YEARS!

ST PAUL'S CHURCH CAMP

40 YEARS!

Sunday, July 24th - Friday, July 29th, 2016

Camp Lucerne (near Wautoma, WI)

MUSICAL: "Noah's Incredible Cruise"

PROGRAM: Campers will sense that God is in complete control; He loves us; He chooses to protect us; He makes promises to us – and He NEVER breaks those promises.

We are planning a special event on Friday, July 29th to celebrate our 40th year of camp. The culminating activity will be a camper produced musical given for parents and friends on **Friday July 29th at 7:30 P.M. at Camp Lucerne Chapel.**

ELIGIBILITY: All church youth and friends are welcome who have completed third through eleventh grades.

COST: \$275 per camper registered on or before JUNE 15, 2016.
\$300 per camper registered after JUNE 15, 2016 (any family sending 3 children, the 3rd child goes free). Financial assistance is available where needed. Please call Selma Taylor (715/344-3505).

\$25.00 of fee is due with registration form. Balance must be received at church office by **July 22, 2016.** Make checks payable to: **St. Paul's United Methodist Camp, 600 Wilshire Blvd., Stevens Point, WI 54481. (715) 344-3557**

Installment payments are accepted. If interested, call the church office.

Camp registrations **MUST** be in by **July 1st.** Camp spaces are limited!

CAMP DIRECTORS: Selma Taylor (715/344-3505); Yvonne Chojnacki (715/340-9333)

~~~~~

**REGISTRATION FORM:** Complete (**one form per camper**) and send to the church office. Please attach \$25.00 deposit.

CAMPER'S NAME \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_  
GRADE COMPLETED \_\_\_\_\_ GENDER \_\_\_\_\_ Male \_\_\_\_\_ Female

Camp buddy preference \_\_\_\_\_

Parent(s) or Guardian(s) name \_\_\_\_\_

Home Address \_\_\_\_\_

Telephone Number \_\_\_\_\_ Emergency Number \_\_\_\_\_

Camper's email address \_\_\_\_\_

Medical Information \_\_\_\_\_

Medications \_\_\_\_\_

Special Needs (i.e. dietary, physical restrictions, etc.) \_\_\_\_\_

|                                                                                              |        |       |         |
|----------------------------------------------------------------------------------------------|--------|-------|---------|
| <b>*Camp fee includes camp T-shirt. Please indicate <u>adult size</u> by circling below:</b> |        |       |         |
| small                                                                                        | medium | large | X-large |

(OFFICE USE ONLY)

\_\_\_\_\_ Camper Letter Sent

\_\_\_\_\_ Health Form Sent

\_\_\_\_\_ Medication Form

\_\_\_\_\_ Registration Fee:

\_\_\_\_\_ Paid In Full

**St. Paul's United Methodist Church**  
**600 Wilshire Blvd.**  
**Stevens Point, WI 54481**  
**stpauls@stevenspointumc.org**