

You may also register online at [Michindoh.com](http://Michindoh.com)!

# Registration



Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Grade (11/12) \_\_\_\_\_ Birth date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Sex:  M  F

Parent/Guardian \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail \_\_\_\_\_

Home Church \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Cabin Mate (No more than 2) \_\_\_\_\_

Michigan state regulations require the name of person(s) to whom we may release your child. Please release my child to:

\_\_\_\_\_

\_\_\_\_\_

## Weeks & Fees Please check week(s) attending

<input type="checkbox"/> Day Camp I	Ages 5-10	July 2-6	\$100
<input type="checkbox"/> Day Camp II	Ages 5-10	July 9-13	\$100
<input type="checkbox"/> Day Camp III	Ages 5-10	July 16-20	\$100
<input type="checkbox"/> Day Camp IV	Ages 5-10	July 23-27	\$100
<input type="checkbox"/> Day Camp V	Ages 5-10	July 30-Aug. 3	\$100
<input type="checkbox"/> Day Camp VI	Ages 5-10	Aug. 6-10	\$100
<input type="checkbox"/> Primary Camp I	Ages 7-9	July 8-10	\$128
<input type="checkbox"/> Primary Camp II	Ages 7-9	July 11-13	\$128
<input type="checkbox"/> Junior Safari Circus	Ages 9-12	July 22-27	\$255
<input type="checkbox"/> Western Junior Varsity	Ages 9-12	July 29-Aug. 3	\$255
<input type="checkbox"/> Western Varsity Teen	Ages 12-15	July 15-20	\$255

*In case of emergency, please provide the following:*

Health Insurance Co. \_\_\_\_\_ Policy# \_\_\_\_\_

Address \_\_\_\_\_

**Required for each camper:** I hereby give my permission to Michindoh, licensed by the State of Michigan Family Independence Agency, to secure necessary emergency medical and surgical treatment and to provide routine, nonsurgical medical care for the minor child named on this form while attending camp.

I release all photos, videos, and audio tapes of my child at Michindoh for promotional purposes such as brochures, videos, web pages, etc. I certify that this information is true to the best of my knowledge.

**Mail your registration with a minimum of a \$50 non-refundable deposit.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_