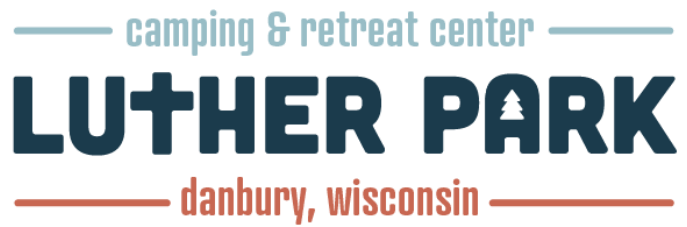


Camp Getaway for
Families Registration
Summer 2025
One per family please!



Primary Adult Name _____ Additional Adult Name _____

Additional Adult Name _____ Additional Adult Name _____

Child Name _____ Age by date of Arrival ____

Child Name _____ Age by date of Arrival ____

Child Name _____ Age by date of Arrival ____

Child Name _____ Age by date of Arrival ____

Address _____ City _____ State ____ Zip Code _____

Congregation _____ City _____ Birthday _____

Email _____ Phone _____

___ I prefer an email registration confirmation ___ I prefer a phone call registration confirmation

Check Weekend registering for:

- Session 1
 - June 27-29
- Session 2
 - July 11-13
- Session 3
 - July 25-27
- Session 4
 - August 1-3
- Session 5
 - August 15-17 (Reserved for Nativity)

Check Weekend registering for:

- | | | |
|--|---|---|
| <input type="checkbox"/> Cabins:
\$145 per adult/child 13+
\$72 per child 5-12 | <input type="checkbox"/> Retreat Center:
\$186 per adult/child ages 13+
\$93 per child ages 5-12 | <input type="checkbox"/> Campground:
\$118 per adult/child ages 13+
\$59 per child ages 5-12 |
| <input type="checkbox"/> Log House:
\$158 per adult/child 13+
\$79 per child 5-12 | <input type="checkbox"/> Treehouses:
\$131 per adult/child ages 13+
\$65 per child ages 5-12 | All children age 4 and under are free |

Please note: Your first choice of lodging may not be available, please call if you want to check availability before sending in payment.

We would like to Pay:

Deposit: \$75

Full Price: \$_____ (please add up the cost and write the total)

OR we would like to... Request Full Scholarship Request Half/Partial Scholarship of _____

Method of Payment:

Check: Make payable to Luther Park

Credit Card: Visa Mastercard AMEX Amount \$_____ Card number _____

Exp ___/___ CSC# (3 or 4 digits on back) _____ Signature _____