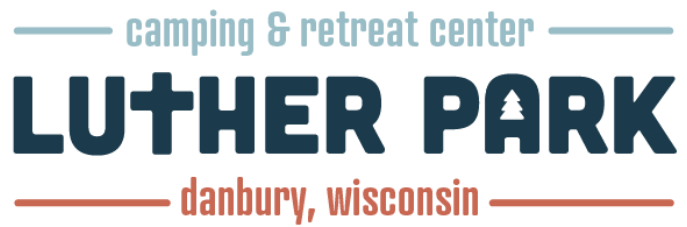


Camp Getaway for
 Families Registration
 Summer 2026
One per family please!



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 26-28
- Session 2
 July 10-12
- Session 3
 July 24-26
- Session 4
 July 31-August 2
- Session 5
 August 14-16 (Reserved for Nativity)
- Session 6
 August 21-23 (Reserved for CRoL/Messiah)

Check Weekend registering for:

- | | | |
|---|---|---|
| <input type="checkbox"/> Cabins:
\$149 per adult/child 13+
\$75 per child 5-12 | <input type="checkbox"/> Retreat Center:
\$192 per adult/child ages 13+
\$96 per child ages 5-12 | <input type="checkbox"/> Campground:
\$121 per adult/child ages 13+
\$61 per child ages 5-12 |
| <input type="checkbox"/> Log House (Med Shed):
\$162 per adult/child 13+
\$81 per child 5-12 | <input type="checkbox"/> Treehouses:
\$134 per adult/child ages 13+
\$67 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 _____