REGISTRATION FORM

Church Family Weekend at Camp Squeah

Name:_____

Number of Adults (13+)_____

Number of Children (5 - 12)_____

Number of Children (4 and under)_

Number of Children in the following age categories:

Nursery (age 1 to 2) _____

Preschool (ages 3 and 4):_

Kindergarten to grade 2: _

Grades 3 to 5: _____

Accommodation Request:

Please put your first and second choice.

First Choice: Choose One

Second Choice Choose One

Special Accomodation Requests:

Allergy Alerts:

Please check:

Check which of the following times and meals you will be in attendance if you will not be coming for the whole weekend:

Whole Weekend

Friday

snack

night

Saturday

brunch

supper

night

Sunday

breakfast

lunch

Submit Form