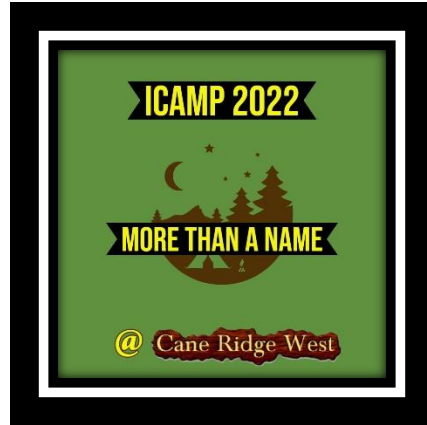


iCamp 2022 Registration Form



September 2nd -5th

- Complete this form, both sides, and all spaces indicated by the asterisks (*).
- Children, youth and teens are required to have a parent or guardian accompany them during the event.
- Use one form per registrant.
- This retreat is an alcohol-free family-friendly event.

Registrant Information*

Name: _____ Preferred Pronouns _____

Birthday _____ Age _____ Gender _____

Phone _____ Email _____

Address _____

City _____ State _____ Zip _____

Registration Fee's* Please fill out for entire group

Fees cover cost of CRW usage and meals. Late fee (after August 18) are \$10.00/person

- \$95 (Children 2-12) x _____ = \$ _____
- \$125 (13 years & over) x _____ = \$ _____
- \$330 Family Registration x _____ = \$ _____

Registration Total

\$ _____

- I am part of a group/family, my registration fee is part of _____'s form

iCamp 2022 Registration Form

Housing Preference *Please circle one*

Dorm Style in Lodge **Cabin** **Tent** **My own arrangement in Lincoln**
- *Does not reduce cost of attendance*

COVID-19

We will make every effort to follow the guidelines set in place to address the Covid-19 threat and will expect individuals to plan accordingly. Masks are optional, but are encouraged if you are immunocompromised or unvaccinated. Please remember that those wearing masks will need others to maintain social distance. *If you are at risk or experiencing symptoms, please do NOT attend this year.*

Emergency Contact Information

***1st Emergency Contact**

Name _____ *Relationship: _____

*Daytime # (____) _____ *Evening # (____) _____

***2nd Emergency Contact**

Name _____ *Relationship: _____

*Daytime # (____) _____ *Evening # (____) _____

Health Concerns *(Include additional note paper if your descriptions exceed space on this form.)*

Please indicate recent illnesses, surgeries or any information you feel will be helpful for the camp staff to know. _____

Dietary Restrictions (Specify): _____

Allergies: Bee Sting Aspirin Penicillin Sulfa Other: _____

**For debit or credit card registration, complete the form online by
visiting the Events menu at www.northernlightsdisciples.org**

Mail paper forms with check to

*4227 S Meridian, #C615
Puyallup, WA 98373*