

Camp Pinetreat

Registration 2008

Please send completed form and a non-refundable
deposit of half the camp fee to
Camp Pinetreat; P.O. Box 1752; Bay Minette, AL 36507
Make checks payable to Camp Pinetreat.

Please fill out completely for ALL campers

Which camp do you wish to attend? Camp Session _____ Dates _____

Camper's Name _____ Name Called _____
Last First MI

Address _____ Parent/Guardian _____

City _____ State _____ Zip _____ Email Address _____

Camper's Date of Birth ____/____/____ Home Phone (____) _____

____ Male _____ Female Cell Phone (____) _____

Grade completed in June 2007 _____ Work Phone (____) _____

Age in June 2007 _____ Emergency Contact _____

Emergency Phone (____) _____

Church Name _____ Denomination _____

Please List Any Special Dietary Needs:

Camper's Swimming Ability Is:

____ Poor ____ Fair ____ Good ____ Excellent

T-Shirt Size: ____ Youth S/M ____ Youth L ____ Adult S ____ Adult M ____ Adult L ____ Adult XL

Ever been a camper at Camp Pinetreat before? ____ No ____ Yes How many years? _____

Roommate or cabin mate request (one name only) _____

I agree to observe the rules and participate in the program of Camp Pinetreat.

Camper's Signature _____ Date _____

In signing this application, I hereby certify that the above information is correct and give my permission:
for the use of photographs, including my child, to be used in Camp Pinetreat publicity and for my child to
be transported in privately-owned vehicles for the purpose of my child attending approved out-of-camp
activities.

Parent's Signature _____ Date _____