

Camp Lookout Registration – Summer 2024

Camper's Name: _____ Gender: _____

Camper's Age: _____ Camper's Date of Birth: _____ Grade in **Fall 2024**: _____

T-shirt Size (circle one): **Youth:** Small Medium Large **Adult:** Small Medium Large

Camp Session Number and Name	Date	Cost
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Buddy Request (for cabin assignments; must be in same camp session; limit of one buddy per camper)

Parent/Guardian Name	Cell Phone #
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Home Street Address	Alternate Phone #
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City/State/Zip	Email Address (for confirmation info)
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UMC-Holston United Methodist Church Name	Other Church Name, City, State
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UMC-Holston United Methodist District Name	Other Church Denomination
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PAYMENT CALCULATION

	Amount
Cost of Session _____	
-Church Sponsorship _____ <u>SC</u> _____	Church Sponsorship Code
-Camp Sponsorship _____ <u>SC</u> _____	Camp Sponsorship Code
Net Cost to Parent _____	
+Donation to Sponsorship _____	
TOTAL PAYMENT _____	

Make check payable to **Camp Lookout** and mail with registration form to:

Camp Lookout
3130 Hwy 157
Rising Fawn, GA 30738

Registrations may also be completed online at www.camplookout.com or over the phone by calling the Camp Lookout office at 706-820-1163 and paying by credit card or e-check.

Please have all required information ready at the time of registration.

