

ILLINOIS MISSIONS UNIVERSITY REGISTRATION FORM

June 20-21, 2008 at Lake Sallateeska
Cost: \$32.00 per person

- * You will need one adult chaperone (age 21+) for every five girls.
- * Camper Information and Medical Release forms must be completed on all campers.
- * Authorization and Request for Criminal Records Check must be completed on all chaperones.
- * Registration deadline is June 1.

Name of person making reservations _____ E-mail _____

Address _____ City/Zip _____ Phone _____

Church & Town _____ Association _____

List all adult chaperones below: Add additional names on back.

Name _____ Address _____ City/Zip _____

Phone _____ E-mail _____

Name _____ Address _____ City/Zip _____

Phone _____ E-mail _____

Name _____ Address _____ City/Zip _____

Phone _____ E-mail _____

List all children attending camp below: Add additional names on back.

Name _____ Name _____ Name _____

Name _____ Name _____ Name _____

Name _____ Name _____ Name _____

Send this Registration Form, Camper Information & Medical Release Forms and Chaperone Authorization Forms with \$32.00 per person to:
Missions Team, IBSA, P.O. Box 19247, Springfield, IL 62794-9247. Make checks payable to: Illinois Baptist State Association.