

Registration date:

Deposit Amount:

Session:

Receipt date:



Camp Gray Family Camp
 Family Application Form
 Labor Day Weekend (Saturday - Monday)

Thank you for registering for Family Camp! To help us prepare for your stay with us, please complete the form below with the requested information and return it to us. If you have any questions or concerns, please contact us at 608-356-8200 or bigfun@campgray.com.

Parent(s) name(s) _____

Address/City/State/Zip _____

Telephone # _____ **E-mail** _____

Children:

Name _____ gender _____ birthdate _____

Name _____ gender _____ birthdate _____

Name _____ gender _____ birthdate _____

Name _____ gender _____ birthdate _____

Name _____ gender _____ birthdate _____

Name _____ gender _____ birthdate _____

Name _____ gender _____ birthdate _____

Name:

Lodging Preference (check one):

St. Vincent Retreat Center _____ Cabin _____ Rustic Cabin (no electricity) _____ Tent/RV _____
 St. Raphael Lodge _____ St. Peter/St. Paul Bunkhouse _____

Any special dietary concerns? If so, describe, including name of camper:

Any particular health concerns that we should be aware of? If so, describe, including name of camper:

Any other information that you would like to share with us, including requests for special activities:

Please mail this form along with your \$100 deposit to: E10213 SHADY LANE RD, REEDSBURG, WI 53959, or fax to 608-356-5855. Deposit and original form should arrive in 3 working days if faxed. Thank you for your help!