

FAMILY CAMP

THE EPISCOPAL DIOCESE OF VIRGINIA

2018 REGISTRATION

Camp Dates:

Mail this form to:

Shrine Mont Camps
110 W. Franklin St.
Richmond, VA 23220

(800) 346-2373 x 1043
mnoide@thediocese.net

Name (contact person): _____

List adult names: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Cell): _____

Email: _____

Parish name and location: _____

Special Needs/Housing Preferences (no guarantees): _____

Children's names and ages (to better plan activities for each age group):

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

Name: _____ Age: _____

How many:

Adults (18+ years old): _____ @ 625/week _____

13-17 year olds: _____ @ 390/week _____

8-12 year olds: _____ @ 325/week _____

4-7 year olds: _____ @ 190/week _____

Infants 0-3 years old: FREE

TOTAL AMOUNT DUE: _____

Send Scholarship Info

Enclosed is a non-refundable deposit of \$75 per person. Make checks payable to Shrine Mont Camps. **The balance is due on June 23, 2018.**

Enclosed is the total amount due for our family.