



Merge - December 28 - 30, 2009

Registration Form

Please fill out this form, make yourself a copy, and mail it along with your fee to DCM.

Church: _____ Ch City: _____ Zip: _____

Church Address: _____

Youth Leader Name: _____

Contact Phone: _____

Contact E-mail Address: _____

of Male Campers: _____ # of Female Campers: _____

Total Attending: _____ @ \$90. Each = \$_____ or Late Fee of \$100. \$_____

No T-shirts or refunds after December 14 deadline. Registration is required for all in attendance.

T-shirt Size:

Small _____

Medium _____

Large _____

X-Large _____

XX-Large _____

Total Shirts _____

Mail to:
DCM
PO Box 10356
Conway, AR 72034

For DCM Use Only

Date _____

Amount \$ _____

Check # _____