

# 2012 Mar-Lu-Ridge Camper Registration

**Please fill out all information requested on this form!** Please either type or print and mail to Mar-Lu-Ridge Summer Camp Registrar, 3200 Mar-Lu-Ridge Road, Jefferson, MD 21755. Include deposit of \$130 with check made to Mar-Lu-Ridge. For additional information or assistance, call us at **1-800-238-9974** or visit us at **www.mar-lu-ridge.org**.

Registration for: 1st Choice Camp: \_\_\_\_\_ Date: \_\_\_\_\_  
 Registration for: 2nd Choice Camp: \_\_\_\_\_ Date: \_\_\_\_\_  
 Email (adult): \_\_\_\_\_ Would you like confirmation via email:  USPS:   
 Camper's Name: \_\_\_\_\_ Male:  Female:   
 Camper's Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Parent's/Guardian's Name: \_\_\_\_\_  
 Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_  
 Dietary & Allergy Information: \_\_\_\_\_ Camper's Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 "Bunk With" Request: \_\_\_\_\_

Note: Written request from both campers' parents must appear on each camper's applications. Only one "Bunk With" request will be granted. Age differences between campers may affect "Bunk With" requests.

Have you previously attended Mar-Lu-Ridge? \_\_\_\_\_ Year(s): \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Emergency Phone (other than above): (\_\_\_\_) \_\_\_\_\_

Check if you would like a picture CD of the week.  (\$10.00 fee will be added to your balance for picture CD)  
 Please contact the camp office if you are interested in purchasing a Day Camp picture CD.

**To Parents:** I understand the policies and programs of Mar-Lu-Ridge, have read and accept the registration and refund policies, and give my child permission to participate in programs and activities provided at the camp. Any photos, video or audio recordings, or interviews taken at camp or during activities which my child appears, may be used for promotion, including website, free of any claims. I also understand that if my child's behavior or conduct does not adhere to Mar-Lu-Ridge guidelines or threatens the safety of other campers, my child may be dismissed from camp whereas I am responsible for transportation, with no refund of camp tuition.

PARENT/GUARDIAN'S SIGNATURE: \_\_\_\_\_ Date: \_\_\_\_\_

### To Be Completed By Church/Organization Officials

Church/Org Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
 Pastor/Leader Name: \_\_\_\_\_ Church/Org Phone: \_\_\_\_\_  
 Church/Org Address: \_\_\_\_\_  
 Total Cost of Camp: \_\_\_\_\_ Church/Org Will Pay: \$ \_\_\_\_\_ toward tuition.  
 Signed: \_\_\_\_\_ Position: \_\_\_\_\_

### ONLY DAY CAMP REGISTRATIONS CONTINUE BELOW

Name(s) of individual(s) who can pick up my child: \_\_\_\_\_

Name(s) of individual(s) who cannot pick up my child: \_\_\_\_\_

Pick-up Time: \_\_\_\_\_ Drop-off Time: \_\_\_\_\_ Please call the office if your pick-up time or drop-off time changes.

	Week 1 June 18 - 22	Week 2 June 25 - 29	Week 3 July 2 - 6	Week 4 July 9 - 13	Week 5 July 16 - 20	Week 6 July 23 - 27	Week 7 Jul 30 - Aug 3	Week 8 Aug 6 - 10
Monday								
Tuesday								
Wednesday								
Thursday								
Friday								

Note: Friday pick-up is at the main camp (Area 1).