

Family Camp begins with Dinner at 5:00 PM on Friday, July 7th. Camp Closing is 1 PM on Saturday, July 15th. Our evening services begin 7 PM. **Complete and mail this registration form** and payment by **June 23rd** to "WV BlackHills Camp":

Zachary DeLeurere 130 Circle Drive Bridgeport, WV 26330

(304) 584-7BHC <u>family.camp@blackhillscampwv.com</u>

Nam	e:												
Addres	is:												
City:						_	Sta	ite:	Zip:				
Phon	e:						Em	ail:					
Phone (Spouse	e):												
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I will stay in	a privat	e unit th	at I owr	า.									
I have tradit	ionally s	stayed in	this sp	ecific car	np-owne	d unit:							
I am request	ing a Ca	amper Lo	ot.										
I am request	ing gen	eral acco	ommoda	ations fo	r Family	Camp th	is vear.					_	
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	ALL: O Fri - 7/7							- 7/7	Sat - 7/8				
	ou be attending							PM		AM	PM		
Family Camp	ŗ	Specific Dates Only:						;	\circ		\circ	\bigcirc	
Sun - 7/9	Mon -	- 7/10	Tue -	7/11	Wed	- 7/12	Thu -	7/13	Fri -	7/14	Sat -	7/15	
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ergency Contact													
Name		Phone											
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Doctor	r	Phone											
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Volunteer Information

Our camp fees are affordable due to volunteers in the store, kitchen, bathroom, etc. Many hands make light work, and we all benefit from this service! We ask that each adult camper volunteers to take a turn. If you have a preference as to which tasks/slots you would like to help with, please sign-up at:

www.blackhillscampwv.com/familyCampVolunteer2023

- For **full-time campers**, we recommend volunteering for **4 slots**.
- For part-time campers, we recommend volunteering for 1 slot for every 2 days staying.





Registration and Fees

• Camp I	Rates for each i Adult	ndividual are based on (Age 13 and older)	the	categ				ay or \$25 per nigl	nt
	 Adult (Age 13 and older) Child (Age 4 to 12) \$75 per full stay or \$ 								
0	Toddler	(Age 3 and under)			F	ree	, , , , , , , , , , , , , , , , , , , ,	., o. 4=0 per8.	
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		g and all meals througho p registration fee is waive							
			Se	elect :	1				
			Adult	Child	Toddler	School Grade Fall 2023	Nightly Rate? Y/N	Pertinent Medical Information: Allergies? Major Illness? Explain below.	Total Fee Amount
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Name Name					\bigcirc				\$
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								Registration Fee (*Waived for Early Registration Forms)	+ \$25*
								Amount Due	\$
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				aym	ent	<u> </u>			
w will you p	ay your camp f	ees this season?							
I will provid	ny payment in f e payment in fu	ıll at camp.							
-		Please provide details:							

If you would like to pre-pay for camp and you are uncertain as to the amount owed, please contact the camp at (304) 584-7242 or camp@blackhillscampwv.com.