

# CAMP BARAKEL

## FAMILY CAMPS

Memorial Day  
Weekend  
May 26-29

&

Labor Day  
Weekend  
September 1-4

[2017]



### Please select your first choice

(you may indicate your second choice in case your first choice is full):

☐ Memorial Day Weekend • May 26-29    ☐ Labor Day Weekend • September 1-4

### Contact Person

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Day) \_\_\_\_\_ (Evening) \_\_\_\_\_ Email \_\_\_\_\_

### Additional adults (please indicate their relationship to you):

Name \_\_\_\_\_ Relationship to Contact Person \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Contact Person \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Contact Person \_\_\_\_\_

### Children

#### Boys

Names	Birth date
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____

#### Girls

Names	Birth date
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____
_____	____ ____ ____

### Housing Options (please indicate 2nd choice, if desired):

- ☐ Cabin, Lodge, or Room
- ☐ RV Park (lots assigned)
- ☐ RV or Trailer (length \_\_\_\_\_)
- ☐ Tent, Pop-up, or Pick-up Camper

### Additional Info

If applicable, which family or group would you like to be housed near?

\_\_\_\_\_

Special needs: \_\_\_\_\_

For our statistics, what church do you attend, if any?

\_\_\_\_\_

- ☐ **Deposit of \$100 enclosed** (checks made payable to "Camp Barakel").  
Deposit is refundable if you cancel two weeks before the event.

### Mail this registration form to:

Camp Barakel Family Camps  
PO Box 159  
Fairview, MI 48621-0159

These weekends fill on a first-come, first-served basis. If you do get in, you will receive word from us asking for additional information concerning your meals and your arrival and departure plans. If you don't get in, we'll let you know and offer you a spot on the waiting list.